9th—1917

State-Wide Anti-Tuberculosis Campaign to Be Launched By W. G. Raoul Foundation

Constitution 4—11—13

A plan to organize the cities and towns of Georgia for a unified crusade against tuberculosis will be put actively under way tomorrow when James P. Faulkner, new executive head of the W. G. Raoul foundation, will leave Atlanta for Albany, Valdosta, Waycross, Brunswick and Savannah. Beginning in the southern part of the state he expects to visit and effect organizations as rapidly as possible in every city and town of over 4,000 inhabitants.

The Raoul foundation was established in 1913 by bequest of the late W. G. Raoul, who left $50,000 to be used in anti-tuberculosis work in Georgia. Mrs. F. G. Hodgson, J. K. Ottley, R. J. Guinn, T. K. Glenn and Joseph A. McCord were named the trustees of the foundation in his will. The foundation was immediately organized and a general survey of conditions in Georgia was made. It was found that there were approximately 5,200 deaths annually in Georgia from tuberculosis, a ratio about equal to that of other states, and that facilities for adequately combatting the disease, and above all, for education along preventive sanitary lines, were very much needed.

Faulkner Chosen Head.

After this preliminary work which was done thoroughly, the trustees set about finding a man to lead the crusade in Georgia. After consulting with United States Commissioner of Education P. P. Claxton and other leaders in touch with the national situation, they finally fixed upon James P. Faulkner, director of exhibits and head of the lecture work connected with the Kentucky tuberculosis commission, which is a state institution. After going into the Georgia situation thoroughly, Mr. Faulkner resigned his Kentucky office. He came to Atlanta a few weeks ago and has already completely reorganized the office of the Raoul foundation, which is at 303 Candler building.

Mr. Faulkner was the pioneer in anti-tuberculosis work in Kentucky and the work he did prior to the establishment of the Kentucky commission, in traveling around that state giving wagon stereopticon lectures, forms an interesting chapter in the history of the anti-tuberculosis fight in America. It was as the result of his personal activity that the Kentucky commission was organized and through his efforts that the state fitted out a railroad exhibit car.

Plans for Campaign.

-zed his plans for a state-wide organi- anti-tuberculosis fight in Georgia, Mr. Faulkner plans to work in harmony and co-operation with the two existing associations, the Atlanta Anti-Tuberculosis association and the Savannah Anti-Tuberculosis association, and with the state board of health and local state boards. Dr. Roy Harris, of the state board, has already cordially indorsed the movement.

"In organizing the state for this crusade," says Mr. Faulkner, "we propose to select in each city a committee of not fewer than five representative people, who will be the local representatives of the foundation. Local offices will be established which it is expected to make self-supporting. It is my plan to personally visit each city to aid in this organization. The local organizations will be supported by funds raised locally, by various means such as the Christmas seal campaigns, by subscriptions, tag days, special appropriations and by help from city councils and county boards where this can be obtained. We expect to have a nurse working regularly in connection with each of these city committees and to establish local clinics as rapidly as possible. A thorough unification of the work throughout the state is our aim, and annual meetings will be held.

"Later we hope to equip a railroad exhibit car as was done in Kentucky and in the meantime, I am planning to deliver special lectures in many parts of the state in both large and small communities.

Free Literature.

"It is our plan at once to make this office a clearing house of information and help in the fight for public health against tuberculosis in Georgia. We are rapidly revising and standardizing the literature on the subject, and phamphlets and other literature will be sent free to all who write and ask. All communications should be addressed to the W. G. Raoul foundation, 303 Candler building, Atlanta, Ga. In addition to sending this literature we will gladly answer letters giving personal direction both to individuals and local organizations. We will furnish free advice as to exhibits and methods of carrying on local campaigns, and will direct and help the local sale of Christmas seals. The Raoul foundation, of course, has had the Christmas seal sales in charge since its organization.

"The cities which I am planning to visit first to aid in the organization of local committees, are Augusta, Columbus, Brunswick, Waycross, Thomasville, Rome, Albany, Americus, Valdosta, Cordele, Fitzgerald, Gainesville, Dalton, Marietta, Elberton, Griffin, Newnan, LaGrange, Dublin, Bainbridge, Cartersville."

JAMES P. FAULKNER.

alth-1917

PUTTING CHINA'S QUACK DOCTORS TO FLIGHT

CHINA'S HEALTH CONSCIENCE has been dormant so many years that extraordinary measures are needed to awaken it. This is a work that Dr. W. W. Peter is doing under the auspices of the Y. M. C. A., and to him it looks better than lending money with American bankers to build railroads in China, or buying and selling goods in Chinese treaty ports along with American merchants. For two thousand years the chief sources of information for China on matters of health have been the quacks with horn spectacles; now the people, from mandarins down to coolies, hear the news gladly. The Council on Public Health represents the China Medical Missionary Association, the National Medical Association of China, and the Young Men's Christian Association. The health crusader that heads this organization is Dr. W. W. Peter, who tells the people throughout the Middle Kingdom "how flies kill people, how filth in houses and streets is as dangerous as poison, how the 'coughing sickness' (tuberculosis) can be avoided, relieved, and controlled, how plague can be prevented, and other vitally interesting things about public and private health." The means employed to scare China into health are set forth by Mr. Charles M. Steele, in *The Christian Herald* (New York), who tells how Dr. Peter has conducted "health campaigns" in fifteen of the leading cities of China in the last year and a half.

"Between 175,000 and 200,000 people have attended the meetings and seen the exhibits. Officials have become deeply interested in the work and are glad to lend their influence and active support to it. Leading men and organizations throughout the country are now sending to the Council on Public Health invitations to conduct campaigns in their cities and towns. In Peking, where 18,000 people attended forty-six meetings last May, there was a Public Health Campaign Committee organized under the auspices of the Ministry of the Interior. At one of the Nanking meetings for women, the governor's wife, Mrs. Feng Kuo Chang, spoke for half an hour. It is an unprecedented thing in China for a woman to address a public meeting.

"During the health campaign meetings are held daily for a week. Admission is by ticket, which can be obtained from the police or through some other agency for distribution. Every morning and afternoon the people are invited to inspect an elaborate health exhibit, prepared by the lecture department of the Young Men's Christian Association, and set up in some large building. This health exhibit covers 680 linear feet of wall space—an eighth of a mile. There are about fifty sections, including placards, signs, diagrams, pictures, and mechanical devices. The mechanical devices used are exceedingly ingenious and effective. One of them is a model of a Chinese house. Out of it comes the figure of a man, who walks across his front yard and then falls into a coffin, whose lids open to receive him. The lids then close and the coffin disappears below the ground. This happens every eight seconds. Placards in Chinese and English explain that some one in the world dies of tuberculosis every eight seconds, and point the moral, 'You can help stop this unnecessary procession to the grave.' This is a new idea. The Chinese, reading the placard, ask 'How?' and the instructor explains.

"Another mechanical exhibit consists of a bell which rings every thirty-seven seconds. A sign announces that every time this bell rings some one has died from tuberculosis in China. Still another and very startling mechanical display consists of a dial with a revolving hand pointing to numbers around the circumference. A bright light is fixt right over the dial, and the placard reads: 'This counter was started when the conference opened, and has been counting the number of deaths from tuberculosis in the world ever since.'

"After seeing the health exhibit, which always attracts great interest, the people are invited into a large auditorium to hear and see a demonstrated lecture on 'Some Relations between National Health and National Strength.' In the demonstrations human subjects are used, students acting parts to illustrate the points under discussion. Electrical and mechanical appliances are also freely used."

Dr. Peter says that mentioning "National Strength" in the title and discussing it in the lecture always wins immediate attention. National strength, he says, is a thought that appeals to the Chinese. They know they are a weak nation among the Powers of the world, and they are eager to learn anything that will help to bring them from a position of weakness to one of strength.

"One day of the week's campaign is reserved for women. On this day the health exhibit is explained as usual, but the lecture is entirely different.

"The subject is 'The Care of Your Baby.' This lecture is demonstrated also. A real baby on the platform with different kinds of clothes, a bath-tub, various kinds of foods, appliances for artificial feeding, nurses, and — more important than all — the mother of the baby herself, make the lecture of an hour and a half seem only thirty minutes long. The 'baby lecture' is generally delivered by some local woman doctor, and has often assumed the form of a real play.

"In the evening the exhibit and lectures just described give way to stereopticon talks on such subjects as these: 'Sanitation of a Chinese City,' 'Flies Kill People,' 'Tuberculosis,' 'Infectious Diseases.' These lectures are delivered both by Dr. Peter and by local physicians, native or foreign, who have been educated in America or Europe. So great are the crowds for the evening meetings that generally it is necessary to secure three or four extra halls in different parts of the city and hold several meetings at the same hour."

The tangible results have been very considerable. These have been recognized by an American firm of patent-medicine venders who issued a pamphlet on "Hygiene and Sanitation," and ended by informing the readers that the way to secure them was by buying Dr. So-and-so's pills in large quantities. But material results are:

"In Hangchow, the campaign paved the way for a smallpox vaccination crusade. In Kaifeng, where the meetings were held in a large theater turned over to the committee, a Public Health Society was formed, having as its leaders the eight Government physicians, who had the responsibility of caring for the health of many thousands of soldiers. In another city, the campaign was followed by a 'clean-up week.' In Chang-Sha, Hunan Province, where thirty-six meetings were attended by 30,000 people, the results of the campaign are now taking form in a $20,000 hospital for tuberculosis and contagious diseases, erected by public subscription.

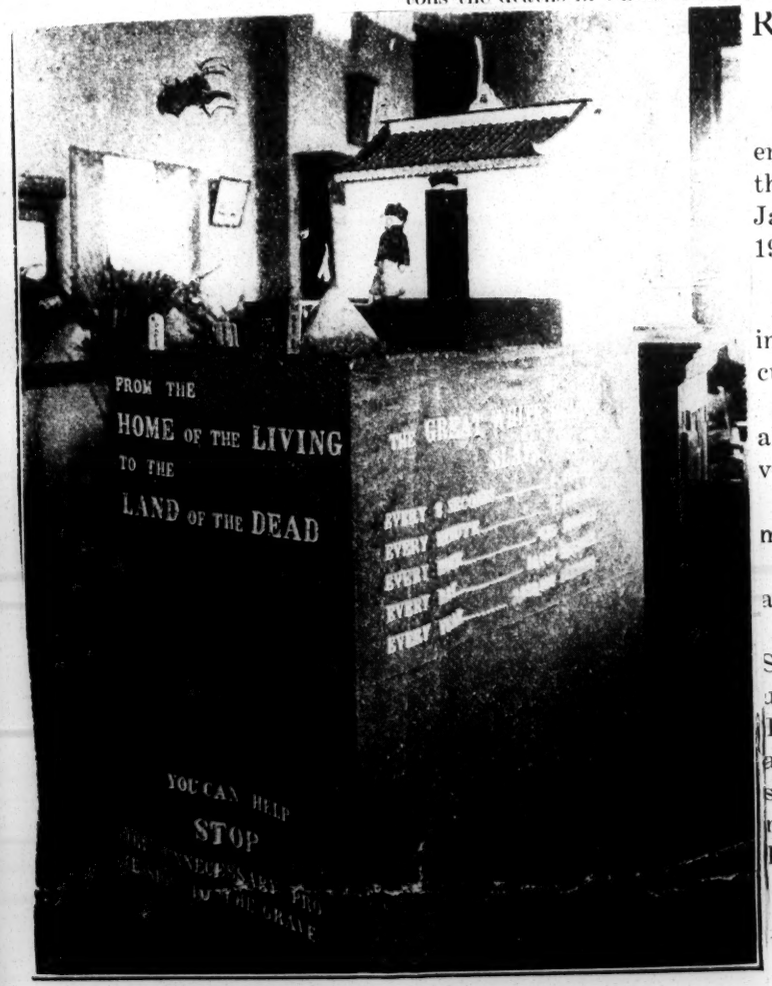
"At Hangchow, in the gloomy halls of a Buddhist monastery, about three hundred Buddhist monks, some of them already sufferers from the dread 'coughing sickness,' listened to a lantern-slide talk and heard for the first time in their lives the teachings of modern science and the uses of air, light, soap, and water.

"At Weihuei, Hunan Province, an amusing incident occurred during the campaign. Following the lecture, in which the dangers of the fly had been emphasized, some Chinese ladies were being shown the health exhibit. One of the pictures showed a common house-fly magnified many times. On seeing it, one of the ladies exclaimed, 'Is that the kind of flies they have over in America? No wonder Dr. Peter talks about the danger. If we had such big flies here in China, we would have to be careful of them, too.'"

Dr. Peter wrote to the author a letter in which he exprest the hope that some day "public health education in China will be as attractive to Chinese and foreigners as Dr. Grenfell's work in Labrador is to all reading people at the present time." "We are now in the first stage of a pouring-in process," he says. "China is just acquiring a stomach for these so-called Western ideas."

HEALTH EXHIBIT USED BY DR. PETER IN HIS NATIONAL CAMPAIGN IN CHINA.

Among them is a dial which counts the number of deaths from tuberculosis in the world, one every eight seconds. Another is a bell that tolls the deaths in China from consumption, one every 37 seconds.



THE WORLD'S DEATH-WALK EXHIBIT.

Every eight seconds a man emerges from the house, crosses the yard, and falls into a coffin that sinks into the earth. It makes the Chinese spectators gasp to see thus proved the ravages of the white plague.

Resolutions Passed by the Louisiana State Board of Health

Tuskegee Student, 1-25-16

At the joint session of the Southern Conference of the Anti-Tuberculosis Association and the Louisiana State Board of Health held at Jackson, Mississippi, October 30th and 31st, 1916, the following resolutions were passed:

"Whereas—Investigations have shown the inherent susceptibility of the Negro to Tuberculosis;

Whereas—Housing conditions among them, almost universally, are conducive to the development and the spread of this disease;

Whereas—This condition is undoubtedly a menace to public health;

Whereas—The death-rate among Negroes is abnormally high,

Therefore, Be it Resolved—That the United States Public Health Service be respectfully urged to undertake intensive work concerning Tuberculosis among the people of this race, and to whites living under like conditions, similar to the investigations which have been made in the South relative to Malaria and Pellagra.

(Signed) DR. WALLACE J. DUREL, Chairman;
DR. E. J. UNDERWOOD, Secretary;
DR. DAN J. WILLIAMS.

Tuberculosis Means Annua... Loss $11,340,800 to State

Complete issue 10-11-15

That the economic loss to Georgia by deaths from tuberculosis amounts annually to the enormous sum of $11,340,800 is declared by James P. Faulkner, new executive head of the W. G. Raoul foundation, who is completing a survey of the tuberculosis situation from an economic standpoint in connection with his plans for state-wide anti-tuberculosis organization.

He bases his figures on the estimate of 7,000 deaths per year from tuberculosis in Georgia. This does not mean that Georgia has a materially higher tuberculosis death rate than other states on the average, but simply that she has the same dangerous situation to contend with.

"Reckoning that there are five people suffering with consumption to each one that dies during the year," he argues, "Georgia's industrial army has on its sick list this year probably no fewer than 35,440 people suffering from this one disease.

Annual Toll of 7,088.

"Tuberculosis, attacking its victims chiefly in youth or before the prime of life, it is estimated that on an average each person that dies of the disease loses thirty-two years of his life that he would not otherwise lose. This being true, Georgia, with 7,088 deaths, loses 226,816 years of her citizens' most valuable time each year, and, rating each individual as worth the low average of $50 per year to the community as a producer, the state's annual productive loss totals the enormous sum of $11,340,800.

"This includes no estimate of the extent to which industry is crippled and the community burdened by the inactivity and the demands of the victims during the months or years of sickness, and neither does it take into account druggists', doctors' or nurses' bills, nor funeral expenses. All these the state is apparently insensible to, though it is responsive to the loss from epidemic among live stock.

Expert Touring State.

"Another failure of the estimate is in putting no dollar valuation upon the tears shed, the heartstrings broken and the loneliness and desolateness of the bereft awaiting their turn. This is not the state's business. Accident insurance companies recognize these things and the courts hold common carriers to account for death by accidents, and the dead from tuberculosis is as dead to his dependents as the dead from accident. Taking $3,000 as an average indemnity allowed by the courts, the loss to the families of the 7,088 victims of tuberculosis yearly—the loss to the state thereby—reaches more startling proportions, and these are unnecessary and preventable losses."

Mr. Faulkner is now engaged in a tour of the state, laying plans for concerted action among the anti-tuberculosis societies now existing and for the organization of new ones in the principal cities.

11th — 1917

Constant Toll of Negro Deaths and Their Causes

White Man Not Safe From Disease So Long as Black Lives in Squalor—Tuberculosis, Its Preventatives and Reliefs.

CHATTANOOGA TENN NEWS
OCTOBER 6, 1917

(By Horace D. Slatter.)

One who notes constantly in the daily papers the published accounts of the deaths in a particular community for the week or month will be compelled to remark upon the large amount of negroes. These are all out of proportion to the population To dismiss the matter casually seems to be the habit rather than to give sober thought. Theorists and sometimes practical physicians and sociologists have laid the cause to improper living, inordinate dissipation, unsanitary housing conditions and a natural predeliction to certain diseases on the part of the negro.

Whatever others may think of the matter, it does not appear to me to be absolutely true that negroes are any more liable to certain diseases than white people, and certainly not in the proportion that would be indicated by the health and mortuary reports. One finds it difficult to reconcile such an opinion with the facts given out from time to time from the draft boards that negroes in such large numbers are found upon examination to be perfect specimens of humanity.

Negroes, particularly in large southern communities, where housing and sanitary conditions in segregated districts are not fit for human habitation, are, to say the least, the victims of circumstances. Naturally they are not liable to tuberculosis and kindred diseases, but with constitutions sapped by the conditions of living, the unsanitary and unsightly communities in which they live offering but little by way of incentive, and the love for frolic and dissipation on the part of a large numbers, who thereby take the disease and spread it to others, make a fearful toll of negro life, which, in many instances, could be averted.

Having waged a fight against the dreaded white plague for three years myself, I am in position to say something about it with a certainty that should carry conviction. There is no saying who will be a victim to this disease. The white man in the mansion has but little surety against it so long as the negro in the hovel is permitted by the authorities to remain there in squalor and filth next door to the city dump pile. For my own part, I had just about as much idea that I or any member of my family would ever die with tuberculosis as I have now that Berlin will ever be the capital of the United States of America.

I counted myself with a fair degree of intelligence, was always able to care for my family in comfort, had daily recourse to the bathtub, three good, wholesome meals, and made just about enough money to be rated in the south "a leading negro." Certainly the usual reasons—poor housing conditions, bad living or dissipation—did not strike us.

We waged a losing fight in the case of my wife, who, after an illness of about two years and eight months, succumbed to the disease. She was well taken care of, had the advantage of good physicians, and, while there is but little medicine can do in this instance, it is true that a strict adherence to the common-sense rules that a conscientious physician can lay down will go a long way towards prolonging life. All things being equal, with physicians absolutely fair from the beginning, not taken with the foolish opinion that to keep the real facts away from the patient and her relatives, the average person of intelligence should be able to win out in a fight against tuberculosis.

Two things are certain The sufferer must make up his or her mind that it will take every-minute vigilance—not one moment of relaxation—to fight continually in order to gain any advantage. The sufferer must be provided with sufficient funds to keep supplied with the milk and eggs and other items of wholesome food necessary to build the system up faster than the ravages of the disease can destroy. Climate chasing has its good points and its bad ones. There is much in a high, dry, clean climate, where the very air one breathes spells life. That can be obtained in the mountains that your family physician will recommend. But against that comes the depression one naturally feels in leaving home and loved ones, in casting himself away among strangers, where there is no kind or loving hand to do a simple errand, except at so much per.

One is surely "up against it" who goes to a health resort with small funds, where taking care of the sick is the leading industry. There the people rightfully maintain that the sick person who comes there has plenty of money, else why did he come The sick man is not always able wisely to judge about his expenditures of funds. He only knows that he wants a certain thing; he only thinks he needs it to send to the drug store or the delicatessen for it. Often he has spent a dollar for what he thought he needed when the need for something really essential presses itself upon him only to find a depleted purse.

The one reason so many colored people die of tuberculosis is that they do not have money to fight it. One must remember that in but few instances does the state make any provisions for negro sufferers of tuberculosis. That very element of the population least able to care for themselves is left to themselves, to spread the contagion all around, endangering the health and the life of the whole community. Let alone they have no way of providing for themselves the large quantities of milk and eggs they must have, the abundance of good wholesome food to eat, and only in the cases of women with parents to care for them or with husbands to look out for their needs, is it possible for the negro sufferer to have the absolute rest that the physician prescribes as if it were so much quinine.

Like most of the other sufferers among my people, I had no money. What we had, home and everything else, had been used up in the vain effort to save her life. But for the fact that in the fourteen years of my public work I had made a host of friends in the heart of the south, I would not have been here today to make this feeble effort to point others of my race to the way of health and life. I had spent my time during those years health and work in a service of the most grateful people on earth—the masses of the negroes in the south who are striving for better conditions, who are striving to educate their youth and who are building homes and churches and schools. That work had been one of love and service—reporting the activities of my people, the activities of the higher sort to the daily newspapers, where it served as a sort of offset to the damaging sentiment created by the constant publication of so much criminal news.

It might have appeared at one time as if the work was not paying enough, but for the most part I cashed in on the work as it was done. Imagine how I feel now, when casting over accounts, I find that from the published reports of my illness and the fact that it was necessary for me to leave work with my invalid wife to seek recuperation in the mountains of Colorado and North Carolina, that the black men and women in the south mostly sent to me, in a little over two years, more than $3,500. It was this money that purchased for me the absolute necessities. It was the spirit in which it was sent that made me feel that life was worth living; yea, infinitely more, was worth fighting for.

Like any number of youn men in the south, I had set out to perform a duty, a duty as solemn to me as any that ever actuated any man. I had no assurance that the service was going to be beneficial. I was simply trying to do my best. Looking back now, however faithful I have tried to be, I find that I might have done ever so much more. I can see that I have been served by my people far more than I have served. I can see that I have had far more of good fortune than misfortune. When I came to this place it occurred to me that another lease on life would give me opportunity to be of still greater service to those people who believed so much in me. Verily, it is worth much to the sufferer to have some reason for wanting to live.

And yet everybody does not have to be a philanthropist at heart, or a utilitarian in desire, to want to live. I can see and appreciate fully that life is sweet to every one. But what is the average negro man or woman to do who is afflicted with tuberculosis? They are simply accustomed to the fact that people in their communities who have "consumption" die in a short while and the fact is before them, more consistently than anything else, that death is only a matter of time. Dying from tuberculosis is about the easiest thing in the world to do. The patient has only to lie down and give up.

One essential is to have a physician who is going to be more than fair. Some physicians are apt to feel that the patient, not having all that he should have, is going to die, and will content himself with writing prescriptions that he knows do but little good save to alleviate suffering. When a sufferer has a faithful, conscientious physician, who wants to save a life, when that patient makes up his mind that he is going to obey that physician, he has gone a long way towards prolonging life, if not towards absolute recovery.

Between my home and the downtown district, a distance of about ten blocks, I could get every day a prescription in every block from well-meaning friends. The only point of similarity in the prescriptions would be that all of them found whisky or gin to be essential and all of them admonished against paying any attention to the doctor's medicine. I saw that while the physician might not know everything about my troubles, he was apt to know more than the village gossip.

Once having made up my mind to follow the advice of my physician completely, it seems to me that I saw results immediately. Certainly it was easier for the physician to advise than for me to execute, but when I considered that it was my life at stake, I decided earnestly to play the game. I eschewed the theaters long before I was bedfast. There were many things that I wanted to do, but I wanted to do none of them quite as much as I wanted to live.

I would like to repeat that unless one has a large amount of will power he is not going to be able to withstand all the remedies recommended by well-meaning friends. Doubtless some of them might do good, but how is one to tell out of the many suggested? The patent remedies experimented with in the homes of the masses of our people are accountable for a large unmber of deaths, for, to say nothing of the inability of the patent medicines to do any good, valuable time is going to be wasted trying them when the sufferer ought to be under a good physician.

Perhaps it was fortunate for me that I was away from relatives and kindred, after all is said. I was not loved to death. I was thrown upon my own resources, knew full well it was my battle, and had no one around me to try my nerves with sympathetic tears and solicitous attention that often counteracts the doctor's orders. Where my relatives might have pulled me off the porch when the weather became unusually severe, the doctor gave me heavier linen. Where my people might have closed the windows tight when the rains came, the doctor made me feel that damp air for the time being was better than no air.

I wish I could write earnestly enough, I wish I could put soul enough in these lines to let my people know that there is no need to die from tuberculosis, especially if the disease is gotten hold of in the early stages. Of course, good, wholesome food costs money. Rest is one of the most expensive items in the catalogue, but if it is at all possible for the money to be found, the average individual with good, common sense and will power enough to do without apparent necessities and foolish luxuries can beat it out.

I was lucky enough at all times in Asheville to be where the food was properly prepared. I have consumed more sweet milk than the average Jersey calf, and I just would not turn against it. If my stomach was a cold storage plant, I could provide the egg supply for a small sized town. God's blessed sunshine and the great, big out of doors will work wonders for the tubercular. My people are too afraid of fresh air. These years of civilization have not yet rid them of the thought that "night" air is poisonous, as if God would constitute this world one-half day and the other half night and expect us to breathe poison half the time.

It is strange how a man will work out of doors all day long, engage himself as a night watchman, where his duties keep him out of doors all night, or carouse half the night with his friends in the open, and as soon as he gets home to retire, feel that he must close every opening as tight as "Dick's hatband." This keeping out of and away from the fresh air, and the frightful habit of buying cheap food at the bargain counters, hurts many a negro. It is a false idea the people have that the negro eats so much. The excellence of the cooking in the south is more of a proverb than a fact. There are good cooks, but as a rule they are engaged in the homes of white families, or are the wives of the more prominent negroes in the cities and towns. The masses of the people eat any old thing, quantity being the first consideration.

When such an individual falls a victim to tuberculosis, he is unable to withstand its ravages very long unless he is able to get the very best food, and there is no one around him who can understand that a sufficiency of what he has been accustomed to eating is not good enough.

The successful fight against tuberculosis resolves itself into a few essentials.

The victim must be fair with himself and realize and acknowledge that he has it.

He must take every precaution not only against the spread of the disease by infecting others, but must guard against infecting himself.

He must be perfectly willing to forego former pleasures, whether of work or recreation, where those duties and pleasures interfere with a rigid adher-

ence to the common-sense rules of health. After all, the consumptive only does to cure himself what he should have been doing all the time.

2—CONSTANT TOLL ... ...

He must retire early.

He must get as much absolute rest as possible.

He must sleep, avoid fatiguing exercise, avoid long and tiresome conversations, and completely give up all thought of expressing physically his affection for members of his family.

A strict and honest compliance with the rules laid down by the physician, rather than experimenting with all the remedies urged by friends or even members of the household, is indeed advisable.

The consumptive must faithfully and earnestly enlist the active co-operation of the members of his family or of those who wait upon him, so that these things may be done every day.

It will not do to relax vigilance one moment. Tuberculosis is a deceptive and elusive disease, and the enjoyment of a few days' good feeling does not warrant a resumption of former dissipations or exertions.

The consumptive, too, has ample time and certainly sufficient motive to get as close to the heavenly Father as possible. He can chase the blues better than any other agent.

DR. C. W. WELCH GIVEN WELCOME BY PHYSICIANS

New State Health Officer Asks Co-operation of People

adv. Insert

Dr. C. W. Welch, the new executive head of the State health board Wednesday was called on by many prominent members of the medical profession both of Montgomery and points in the State. These physicians called to pay their respects to the new State health officer, and to assure him of their hearty cooperation in efforts to safe-guard the health of the people of Alabama.

Dr. Welch, through his ten years' connection with the State health board, is familiar with the details of the work that confronts him, but he is asking suggestions and advice from the physicians of the State, candidly telling them without their cooperation much of the effort of the board must meet with failure.

"The State health board is a department of the State government for the people," said Dr. Welch in discussing the work of the Board," and it is intended primarily for the good of the people. Without the ccoperation of the physicians of the State, naturally much of our work must fail in its effect. and it shall be one of our most imperative duties to keep the people informed.

"The newspapers of the State are instruments for great good in the work of this board, and I hope to see the press cooperate in a generous way in keeping the people informed. I wish to assure the press that the health board earnestly desires its confidence and cooperation, for this board will give to the press all of this."

Dr. Welch modestly refers to his big part in the machinery of the board under the general statement of "the State board of health will endeavor to perform this service." There will be no changes in the office force of the board.

Dr. W.N. Atkins, medical director of schools of Atlanta Georgia after examining 14,601 white pupils and 4,455 colored pupils found 74.6 per cent of the white physically defective, and only 36.6 per cent of the Negroes defective. The Board of Education received this information with great surprise.

The Crisis, May, 1917. P. 58.

Health—1917

DISEASE, DEATH AND SCIENCE.

Noting that 50 years ago the average length of life in this country was only about 34 years and is now 45 years, and that 50 years hence it will be almost 60 years, the Houston Post, urging support of the Texas health campaign, remarks Advertiser

"All of this gain in lengthened life is due to the practice of disease prevention. And if the world would put into practice all that is known of disease prevention today, the life of even the present generation might be lengthened by a dozen years or so."

10-31-17

The Post thinks the rural health campaign in Texas is sure to lengthen the life of the Texas farmer by not a few years. In the cities intensive health work is "halting" the ravages of tuberculosis, and dipththeria and a dozen other ills that formerly were great menaces to human life.

"Here in the city of Houtson," remarks The Post, "mortuary statistics show that old age is the rule and not the exception. Not an inconsiderable number of the people of this city reach the age of 90 years. Perhaps a fourth of them live to be more than 80."

Between 1910 and 1915 the number of deaths from tuberculosis in the United States decreased 25 per cent., which is a hopeful sign due to better health measures. Pneumonia declined in deadliness in that time.

The main problem of the health students in these countries is represented in the infant and in the negro. This is clear from available mortuary statistics. The only important countries or provinces having a lower death rate than the United States are—or were before the war—Denmark, Ontario, Holland, Australia and New Zealand. But the mortality rate among infants an dthe negro race in this country is appalling, though probably not greater than most any other country of corresponding importance.

In Chicago the death rate among negroes is 23.9 per thousand population, whites 14.0; in Birmingham, negroes 22.7, white 11.3; Boston, negroes, 23.0, whites 16.0. Out of 79 selected cities the average death rate is, negroes, 27.5, whites 15.0. (These figures are for 1915). The highest death rate among the negro population is 56.6 in Columbia, S. C.

In 1913 nearly 18 per cent. of all deaths of all classes and sexes reported in the registration areas in this country were of infants under 1 year of age, and more than 25 per cent. were of children under 5 years of age. After the first five years of age deaths were most frequent among persons between 70 and 75 years of age, inclusive. This applied to both sexes combined and to women alone, the deaths among these groups forming 6.56 per cent. and 6.88 per cent. respectively of the corr sponding totals. For men alone, however, the period of greatest mortality was between the ages of 65 and 69, inclusive, the deaths during this period constituting, 6.4 per cent. of the total for males.

Nearly five-sixths of the total number of deaths due to diarrhoea and enteritis in 1915 were of infants under 2 years of age.

Stomach troubles, due to improper food, slay our infants. Unsound fathers and mothers, are responsible for weakened constitutions and lowered resisting powers in thousands of infants.

The negro's trouble is partly economic. Improperly housed, insufficiently fed and ill-clad, the negro's body is attacked by certain diseases more readily than is the white man. Tuberculosis is the negro's special enemy. The negro's body succumbs more rapidly to this malady than does the white man's but in addition to that the negro's economic status also hampers him in seeking more agreeable surroundings once he is stricken with the disease. He is not in position uniformly to command the best medical attention; again he will not follow the physician's instructions as strictly as the white patient. Infant mortality among the negroes is far higher than it is among white people. Does it require argument to establish the proposition than the child raised by primitive method shas a slighter chance of surviving than does the child raised by scientific formula? If so, here is an example of the success of the two plans.

With all due respect to the grandmother who raised ten children on the plan that little dirt and a few green vegetables wouldn't hurt a baby if the baby wanted these things, we believe that the modern physician who has helped to pull hundreds of babies through dangerous spells of illness, knows more about the baby's lungs and stomachs than the unscientific mother of ten who while she is wise from experience, nonetheless lacks that training which modern science provides the medical student.

Science is lowering the death rate among infants wherever it is given the opportunity of applying its principles.

A HEALTH CAMPAIGN IN ALABAMA.

Advertiser 10-7-17

Every county in Alabama now has an opportunity to have a sanitary survey without cost to itself. The Rockefeller Foundation, which is fostering health campaigns all over the country and fighting disease all over the world, will furnish the men and the means for doing this work in Alabama. The Foundation will send a unit of medical officers and a unit of sanitary experts to Alabama. The State Health Department of Alabama agrees to maintain one unit in the field.

This arrangement makes possible a thorough and intensive health campaign throughout the State, in counties and cities—in either or both. All that is necessary is for the people of each community formally to make known to the State Board of Health their desire to have such a survey. Sound and practical measures of hygiene will be explained and demonstrated. The care of milk, protection from bad drinking water, undrained water puddles, the destruction of the mosquito and the house fly—in fine, all germ-breeding sources will be subject to attack and purification as far as practicable.

The Advertiser would impress upon the people of Alabama the importance and desirability of this work. It trusts that none of the people will avoid a responsibility to themselves and their neighbors on the plea that the health campaign is fostered and supported by a millionaire and a non-resident. There is nothing personal in the readiness of the Foundation experts to undertake the work of making Alabama a still better place in which to live. They do this kind of work not only in the other States but in other countries than this. It is no reflection upon Alabama that such an agency has come into the State to offer its services, free, to our people. The offer is entirely unselfish and commendable, and should be well received by our people.

It is almost common knowledge that malarial and typhoid fever may be entirely avoided by any community which keeps its food, its water and its milk pure, and the breding places of flies and mosquitoes properly treated and the same is true of yellow fever. We no longer have smallpox plagues. Smallpox is a filth disease, broadly speaking. It must start from a filthy source. By attacking its source medical science has eliminated smallpox as a cause of terror to communities, though of course smallpox epidemics in mild forms do occur here and there. Tuberculosis comes out of impurities.

Science and humanitarians are combatting more and more efficiently the physical woes of mankind. Sanitation has reduced trench and camp diseases to a minimum. It has cleaned up the soil of war-ridden Serbia as well as it could, hampered as it was by the presence of the enemy. It has made the Panama Canal zone famously healthy. It has kept European plagues out of America in recent years.

We are fast becoming the most sanitary people on earth, but we still have far to go. Alabama now has an opportunity to profit by the best sanitary knowledge of the day, and without cost to her people.

N Y C CALL

SEPTEMBER 30, 1917.

NEW YORK AND ITS NEGRO BABIES.

Most of us are so accustomed to thinking of the great East Side as the particular place where the fatal consequences of social and economic justice fall most heavily upon the poor, innocent babies whose misfortune it is to be born within its borders that we do not even know that in those crowded tenement sections where New York's Negroes are forced to segregate the toll paid in babies' lives is far, far greater. In a recent issue of the New York city health department's monthly bulletin appeared a study of the great mortality among the city's Negro babies which does the department great credit. For it gets down to real fundamental causes and their remedies in a way most heartening to the Socialist.

After learning that the same causes which make for the high infant mortality rate among the whites are operative among the Negroes, only to a greater extent, that the good old "triad of 'baby-killers'—poverty, ignorance and neglect"—works even a greater havoc among Negro babies, we read:

> "The well-known relationship between family income and infant mortality exists among Negroes as among the whites. The crude death rate is exceedingly high in all Negro districts. There are, however, well-defined differences in their respective rates, resulting, we think, from economic conditions. In the districts where the family income is highest the death rate is lowest, confirming the opinion that if we can improve the social and economic condition of the Negro an appreciable reduction in their death rate will have been secured."

* * *

Of course, with the writing of the above paragraph the cat is out of the bag, and practically everything has been said that needs to be said. But for completer confirmation it is useful to read further that, so far as Negroes are concerned:

> "Few people are so poorly organized for mutual cooperation.
>
> "Few people are so handicapped along industrial lines. Except for a limited sphere as waitresses, cooks, butlers, porters, maids, elevator boys, longshoremen and kindred positions, the Negro's opportunities, as a class, are few and far between. . . .
>
> "Few people have a large number of lodgers or occupy a fewer number of rooms per family, than the Negro. This is undoubtedly largely due to the higher rents exacted of Negro tenants. It has been estimated that 33 per cent of the Negro population in Harlem are lodgers.
>
> "Few people have a larger quota of working mothers. This is a condition forced upon the race by economic and industrial conditions and limited opportunities. The earning capacity of many of the very elect among the Negroes is frequently so comparatively small as to necessitate the wife taking up some pursuit in order to meet family needs. Except for a small propor-

tion of colored men who, because of indifference or laziness, necessitate gainful occupation by the wife, the majority of these people look upon the employment of their wives as part of their present industrial handicap, rather than because they desire them to work. . . .

"Few people are more easy-going, and of the 'let-tomorrow-take-care-of-itself' type, than the Negroes. Lack of ambition has been forced upon him. . . ."

When in the light of these plain facts squarely confronting us we learn that, when the city's infant death rate for 1915 was analyzed, it was ascertained that, while the rate as a whole was 98.2 per thousand births, the infant mortality rate of the colored was 202, as against 96.2 for the whites—an increase of colored over white of 110 per cent—then we realize, in terms of little dead Negro babies, how their parents are being victimized by the white man's social and industrial standards.

* * *

The immediate needs of these ostracised and exploited people dwelling in our midst, to whom even the best of us scarcely ever give a thought are outlined in part as follows:

An improvement in the industrial status of the Negro, so that he may gain admission to a larger and more varied field of employment, and thus increase his weekly income.

Increased mothering of Negro infants. This will follow the former, since the mother will be enabled to remain at home instead of seeking employment, so necessary at the present time, in order to keep the family together.

Increase in maternal nursing, which will follow nonemployment, or, rather, the staying at home of the Negro woman. Increased family budget will make for better food, more peace of mind, and, therefore, an improved maternal supply of milk.

Better housing conditions for these people. With an increased income, better home conditions will be sought and will follow. . . .

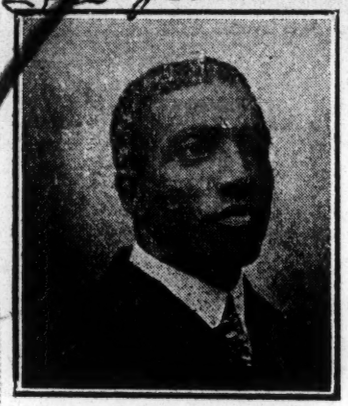
Prenatal instruction and supervision, not only for the legitimate, but for the illegitimate. . . .

The early care of newborn infants, particularly the illegitimates, which are relatively numerous among these people. . . .

Moreover, we are warned that the Negro infant mortality problem is a community problem, since disease in this race spreads, through devious means, among the white population. And no doubt this appeal to the selfishness and desire for the preservation of their own babies will be about the only thing that will rouse white mothers and fathers to the effort of diminishing the unnecessary disease and suffering and death among their colored fellow citizens.

We certainly hope they will become roused to do whatever they can do, soon. But we know that the only real help for the poor little Negro babies and their body-broken, heart-broken mothers is the establishment of the new social and industrial standards which Socialism alone can bring them.

The Journal of Lincoln 1-27-17



HEALTH TALKS

PREVENTIVE AND REMEDIAL MEASURES for the CONSERVATION OF HEALTH

By DR. J. W. PIERCE

Among the many preventive measures instituted against the enemies of health, probably there is none that occupies a more important place in the list than proper ventilation. Especially is this true at this season of the year when the members of the human family are thrown so closely together because of atmospheric necessity, both in private and public gatherings. An apology on the part of the writer may be required by the general reading public for venturing to discuss a subject of such commonplace consideration, and the discussion may wound the finer sensibilities of some in whose hands this health talk may fall. But common observation daily on the part of one who finds himself face to face with this unhealthful situation, makes an apology, if one is forthcoming, negligible.

It would not be oversetretching the imagination if we would say that from 90 to 95% (per cent.) of gatherings in churches, school rooms, public halls, private assembling and even individual homes don't get the proper and necessary ventilation commensurate with good health. If this statement is accepted as being true, what does that mean? It establishes the fact that from 90 to 95 per cent. of the people during the cold months of the year at least, knowingly or ignorantly, subject their lives and health to conditions that predispose to diseases and disordered physical constitution.

This huddling together in practically sealed rooms and halls during the winter months is based upon a false premise. This false premise is what you may designate as "cold-air phobia;" i. e. by admitting a normal current of fresh air into the room is to the unacquainted a drought of air which they interpret as pneumonia, "colds," "grip" and other consequent respiratory diseases. And as a result of the lack of the proper ventilation they put themselves into position to obstruct nature's efforts and contribute their share to the contracting of these same ailments which they attribute to fresh air currents. It is absolutely necessary for all classes of individuals to address themselves to this most important question, and conclude for themselves the good results derived from the observance of proper ventilation, and the bad results as a lack of it.

It has been stated on authority as the outcome of painstaking investigation that each person should be provided with 1000 cubic feet of air space with a reasonable amount of air change from time to time in order to insure proper contents of air in keeping with good health. To put this in another way, it means that a room measing 10 feet long, 10 feet wide and 10 feet high is required by each person to keep himself in the bounds of healthful atmosphere. This at first would seem to be quite a very large space to be occupied by one individual, and it doesn't seem reasonable for such a provision to be made for practical purposes in keeping the air of rooms free from vitiated elements during the hours of occupancy by more than one. But it does not destroy the fact that such an air capacity is necessary to maintain normal purified air which influences the health for good by the process of respiration. It does not take one person very long to make impure and vitiate the air of a room with the capacity 1000 feet.

Now since it is impossible to afford each person this air space, how shall the people get the benefits of pure air when a few or many occupy such a small space? There is only one solution to the problem; and that is continuous ventilation with a constant change of air. With this kept before you, it is quite possible to keep the air in rooms and halls, and churches, etc. in a fairly good condition commensurate with good health.

This brings us to another important point in ventilation. That is, the method or how to ventilate. This has also been worked out on an elaborate and scientific basis, but which for practical purposes in a large per cent. are not conducive to practical utility. In large manufacturing establishments, colleges and universities, Federal and State buildings, etc., this system is observed with a marked degree of accuracy. But for the average and where ventilation is ignored, a more simple method is required and can be instituted by all.

In next week's article we will discuss various methods of securing proper ventilation.

Negro Birth Rate Low

United States Census Bureau Birth Registration Report Reveals the Fact That the Negro Population Is Not Increasing as Rapidly as the White.

By DR. W. A. EVANS.

THE first report on birth registration issued by the United States census office gives the data for only ten states and the District of Columbia. In the remaining states either there is no registration of births or else the registration is so faulty that the census office will not accept it. With these limitations in mind we can draw certain conclusions from the report.

One is that the negro population is not increasing as fast as the white. The white population is being added to by immigration as well as by excess of births over deaths. There is no negro immigration, and the death rate in this area is higher than the birth rate. The comparative figures are: Birth rate, 20.6 per 1,000; death rate, 23 per 1,000. The corresponding figures for whites are: Birth rate, 25; death rate, 13.8.

It is to be borne in mind that the registration area contains no southern states. It embraces the six New England states, two central eastern states, New York and Pennsylvania; two Mississippi valley-Canadian border states, Minnesota and Michigan, and the District of Columbia.

There is no question that in this area the birth rate of negroes is lower and the death rate higher than that of whites, but it is not certain that negroes are going out of the world faster than they are coming into it.

The second conclusion is that the population is increasing slowly even during these days of no immigration. In the registration area the increase is 1.1 per cent. a year. Were the rates to remain just as they are and were immigration and emigration to stop, the population would double in about ninety years.

In thirteen cities in the area the death rate was higher than the birth rate. In eleven of these cities there were located asylums or other institutions which served to disturb the normal balance between births and deaths. In two—Rensselaer and Saratoga Springs—the bald fact seemed to be that the women were not bearing enough children to compensate for the deaths.

For the next conclusion there is not much basis in this report. It is founded on one study in this report on data supplied by a study made in Manchester, N. H., and on other data. The conclusion is that the stock that has been in this country more than two generations shows a strong tendency to dry rot. The death rates of this group are low, but the birth rates are also so low that there is but little natural increase.

CAUSE MAY BE TUBERCULAR.

W. C. writes: "Will you please answer in your column what various causes may produce blood in the sputum? I am not troubled with a cough, so I hardly think it comes from the lungs. Does a goiter ever cause this condition?"

REPLY.

The most important cause is tuberculosis. That disease should always be thought of and searched for. Among other causes are infections of the bronchial tubes due to other bacteria than tubercle bacilli, nosebleed, tonsil trouble, whooping cough, heart disease, stonemason or knifegrinder's lung, injury to the chest, pneumonia, embolism in the lung, tumor of the lung, aneurism, foreign body in the air passages, syphilis of the upper air passages, bleeding of the gums, hemophilia, scurvy, goiter.

This department offers a free health service to readers of The Evening Mail. Queries not suitable for reply in this column will be answered by mail if a stamped, self-addressed envelope is inclosed.

Health—1917

TO PROLONG POLICY-HOLDERS' LIVES

NO MAN IS ALLOWED to burn up his house after insuring it; but he can insure his own life and then proceed to drink himself to death at his own sweet will. Fire-insurance companies insist that certain precautions shall not be neglected by the owners of insured property, in order to lessen the danger of fire, and on penalty of invalidating the insurance. Life-insurance companies ascertain, before they insure a man, whether or not he is "insurable," after which they usually abandon him to his own devices. Some life-insurance companies are abandoning this *laissez-faire* policy so far as to give their policy-holders periodical health examinations. That the functions of a life-insurance company may profitably be extended to the conservation of life is the opinion of Dr. Eugene Lyman Fisk, medical director of the Life Extension Institute, of New York City. In an address delivered before the American Association for the Advancement of Science, on December 29, Dr. Fisk spoke as follows:

"Which is the greater public service for a life-insurance company to perform: to pay a ten-thousand-dollar claim to a widow and children or to keep alive a one-hundred-thousand-dollar husband and father? . . . . . .

"Rapid growth of sentiment in the past few years is adding this great function to the business of life-insurance—that of conserving life and improving health as well as paying death-claims.

"More than a dozen old-line companies now give the periodic health examinations to varying numbers of their policy-holders, either through the Life Extension Institute or their own offices. About thirty companies are sending out health literature, and recognize the principle that the machinery and the organization of the life-insurance companies can be utilized for these life-saving purposes. . . . . .

"It is becoming recognized that the death-rate is not a fixt quantity, that it can be controlled by human agencies, that in wiping out communicable disease, like typhoid and tuberculosis, we are only taking a short step in health conservation; that slowly progressing organic disease is taking more lives than communicable disease, and that by rational methods of living and careful periodic examination of the human body, these diseases can be checked and controlled and human life prolonged.

"The expense of carrying on this work, therefore, by the life-insurance companies is more than offset by the saving from reduced mortality.

"The life-insurance tables, graduated to end at ninety-five, are simply based on past experience, governed by past conditions. It is within the power of science greatly to modify these conditions and radically to change the so-called law of mortality.

"Periodic examinations thus far made among policy-holders show, approximately, in all companies, the following conditions:

Seriously affected	4.25 per cent.
Moderately affected	64.12 "
Slightly affected	30.42 "

"This closely approximates the conditions found in any large group of people who are examined by the Institute. They show that the average individual is to some degree impaired.

"About 40 per cent. of those reexamined by the Institute show definite, measurable improvement, altho in the natural course of events, being one year older, they would be expected to show some deterioration."

Government investigation covering one million workers shows, according to Dr. Fisk, an annual average loss for the whole country of about two hundred and seventy million days on account of illness. Besides this, he reminds us, there are millions of people who do not lose a day's work on account of illness, but who work year after year physically below par—billions of days of inefficient or substandard work that have never been counted. The following are the ways in which Dr. Fisk suggests that life-insurance companies should broaden their functions into those of life-saving as well as death-indemnity:

"1. Educational work among policy-holders by means of health bulletins.

"2. Direct intensive work among policy-holders by means of periodic health surveys solely for the purpose of prolonging life.

"3. Reports and advice to entering policy-holders with regard to their condition as risks and the ways by which they can become better risks.

"4. Cooperation with health departments and health agencies to secure better health legislation.

"5. Thorough organization and standardization as to technique of the medical examinations, in order that the results may be of value to science in the study of human defects and the influence of living habits.

"6. The stimulation among medical men throughout the country of a close study of diagnostic technique in the detection of early signs of bodily impairment and the personal hygiene necessary to combat such tendencies."

Practically all of these things, he says, are now done to some degree, but there is need for concerted action to make their utilization complete instead of partial and experimental. Dr. Fisk goes on:

"When we consider the amount of energy and money and time and human intelligence that has been exerted to provide the superficial appurtenances of civilization; how we have girdled the earth with wireless telegraphy and the telephone; our undersea and overhead activities; and all the marvelous developments that science has provided for amusement, for dissipation, for money-getting—it is rather pitiful to think of our helpless condition as we face the average man of to-day and his physical equipment.

"With the leading nations of the world in a death-grapple, we can not stand idly by, as children viewing a tragic film-play, and trust to luck for everything to come out right. Action is needed. The insurance companies can mobilize for physical preparedness among the people. Will they do it?"

N Y MEDICAL RECORD
NOVEMBER 24, 1917

Journal of the American Medical Association.

November 10, 1917.

1. The Diet of Prisoners of War in Germany. Alonzo Englebert Taylor.
2. Prophylactic Therapy for Rickets in a Negro Community. Alfred F. Hess and Lester J. Unger.
3. Carbon Monoxide Poisoning. William D. McNally.
4. Carcinoma of Prostate: An Improved Technique for Radical Excision with Preservation of Urinary Control. Hugh Hampton Young.
5. The Etiology of Perthes' Disease. Percy Willard Roberts.
6. Systematization of a Surgical Service. Eugene H. Pool and Frederick W. Bancroft.
7. Surgical Treatment of Chronic Enterocolonic Diarrhea. Samuel C. Gant.

2. Prophylactic Therapy for Rickets in a Negro Community.—Alfred F. Hess and Lester J. Unger, realizing that for many years cod liver oil has been regarded as the sovereign remedy for rickets, decided to investigate whether its usefulness could not be extended to the prophylactic treatment of this disease. Since about 90 per cent. of the colored babies are subject to rickets, these men chose a negro community in New York, known as Columbus Hill, in which to carry out their investigations. This district, having a population of about 9,000, bears the unenviable distinction of having the highest mortality of any neighborhood in the city, being New York's "black spot." They began their work on about eighty infants between the ages of 4 months and a year, belonging to families in which the other children showed evidences of the same disease. Physical examinations were made and records kept with an examination at the end of two, four, and six months. Of course many mothers did not keep up the therapy, so at the end of the six months only forty-nine babies had been given the full treatment. Results showed that the development of rickets was prevented in more than four-fifths of the infants who received the oil for six months, and in more than one-half of those who were given it for four months. Of the sixteen infants who did not receive the oil, fifteen showed signs of rickets, though all of them lived under the same conditions and many in the same families. No other treatment was given, nor was a change of diet or mode of life attempted which could account for the difference in the results in the two groups of cases. The oil proved to be a more potent factor than breast feeding in warding off rickets, as almost all the colored babies developed rickets even when breast fed. They further state that it is difficult to tell either the minimum length of time that the oil must be given to accomplish prophylaxis or the minimum dosage necessary. Results showed, however, that a four months' course of treatment, averaging a total of from 16 to 20 ounces of oil, is insufficient to afford protection. It would seem that a six months' course of treatment should be considered the minimum duration for beneficial results. Their plan was to give infants under 6 months one-half teaspoonful of oil three times a day, and older infants twice this amount. It was found that almost all babies can take cod liver oil, although it may disagree temporarily and may have to be discontinued for short intervals when there is digestive disturbance. Infants of from 2 to 3 months tolerate the oil in half-teaspoonful doses, and younger ones may be given still smaller amounts. This study was not carried out during the summer months, so that it does not provide a criterion of the practicability of oil therapy in the warm weather. As the result of personal experience gathered at other times, these men believe that with slight modification it can be pursued throughout the year. In summer, moreover, rickets seems to pass through a quiescent period; therefore treatment is not so necessary as in the colder season. The results of this investigation by Hess and Unger have been so satisfactory that they have led to the establishment of a rickets clinic in Columbus Hill by the Department of Health, in connection with its baby welfare station, where cod liver oil will be dispensed at cost.

A NATIONAL PROBLEM.

Dr. W. A. Evans, eminent Chicago medical authority, says in a recent article on "Mortality Among Negroes," that any conclusion that "the negro is in bad shape in the south only would be incorrect."

"The bad conditions under which negroes live prevail in the north just as they do in the south," he says, "and maybe a little more so."

Dr. Evans goes on to say:

> Whenever a northern city is disposed to sneer at southern cities for their high death rates it will be well for them to consider what would be their death rates if from one-third to two-thirds of their population were negroes. Whenever any northern community feels like taunting the south with injustice to negroes it is well to remember that the proof is conclusive that the northern sense of justice for the negro only works at long range.

Here is something which every southern negro might wisely pause to consider before joining in the dubious and uncertain trek northward. Not only does it show that the so-called "negro problem" has ceased to be distinctly southern, but has become truly national, but that it in reality is a worse problem in the north than it ever was or ever could be in the south; and it forms an additional evidence that any negro who knows when and where he is well off will stick by the south.

The health department of New York city recently issued a bulletin declaring that the death rate of negroes there is almost twice that of the general public—white and black combined. There the death rate of the general population being 1, the death rate of negroes from all diseases is 1.7. The negro death rate from heart disease is 1.5; from Bright's disease, 1.8; from pneumonia, 2; from typhoid fever, 2.2; from tuberculosis, 3.2. And the infant death rate among negroes is 194, as compared with a rate for all babies of 91.

If any negro can from these statistics draw an incentive to quit the south for the north, or find any comfort in the prospects of the change, he is, of course, welcome to it, and there is no law to stand in the way of his going.

But if he is a wise negro, he will investigate and think deeply before going, then if he goes at all, go with his eyes open—which, we fear, the vast majority of them, to their sorrow, do not.

HEALTH CONDITIONS AMONG N. Y. NEGROES

The New York Age

2-8-17

Department of Health of New York City to Make Health Survey on February 15.

400 DISTRICT NURSES USED

Under Direction of Dr. Wynne all the Nurses Employed Under the Department of Health will Make a House to House Canvass of Harlem and Columbus Hill Districts and Investigate.

Four hundred district nurses, operating under direction of Dr. Shirley W. Yynne, assistant registrar of the Department of Health of New York City, will make a house to house canvass on Saturday, February 17, from 9 a. m. to 9 p. m., in two of the districts in Manhattan largely populated by colored people—Harlem and Columbus Hill—in search of information which will enable the Department of Health to make plans for the improving of the health of the colored people. Three similar surveys have been made in othe rsections of the city among other races.

This survey was decided upon at a conference held last Friday morning in the office of Dr. Charles F. Bolduan, director of the Bureau of Public Health Education, Department of Health Building, 149 Center street, at which were present Dr. Bolduan, Dr. William H. Guilfoy, register Bureau of Records; Dr. Shirley W. Wynne, chief Division of Statistical Research; John T. Clark, secretary Housing Bureau, National Urban League; J. A. Robinson, city editor of the *Amsterdam News*, and Lucien H. White, city editor of THE AGE.

Light on Health Conditions.

The survey is expected to throw light on the health conditions among the Negroes and to settle once for all whether or not the Negro is or is not susceptible to certain diseases. The high infant mortality rate among Negroes has frequently been commented upon. Those most conversant with the facts believe that the reasons for this high rate is almost wholly economic. If this is borne out b ythe survey made by the Department of Health, it will undoubtedly lead to the inauguration of preventative measures, which will reduce the infant mortality rate among Negroes to that enjoyed by the rest of the community.

A direct result of the survey is expected to be the establishment of municipal day nurseries in Harlem and on Columbus Hill. This will be done by the Department of Health, declares Dr. Bolduan, if the need is found for these utilities. It is almost an absolute certainty that scores of cases will be found of small children whose parents are compelled to go out to work, but who have no means of providing for the care of the children during the daytime.

Questions to Be Asked.

Among the questions which the nurses will ask are questions bearing on the number of persons in the household, the number of boarders, the total income, the rent, the number of rooms occupied, and the kind of house, whether private house, apartment, etc. Emphasis will be laid upon the presence of any illness in the household. The nurses will ask the nature of the illness, its duration and whether the patient is under the treatment of a private physician or dispensary, or whether he is taking patent medicine or home remedies.

The result of the survey will subsequently be published in pamphlet form by the Department of Health and will undoubtedly be of considerable service in planning measures for the improvement of health conditions among the Negroes of New York City.

The Savannah Tribune

2-24-17

Savannah's health record for 1916, surpassed that of any of the preceding thirty years, according to the recent report of the city health office. There has been less of sickness and less of death among all classes and from nearly all causes for any year since the beginning of dependable records.

Since the relative poor health of Negroes has been regularly cited as being a menace to that of the whites, it is refreshing and encouraging that these reports indicate that the Negroes, too, show decisive health improvements. The record is doubly interesting when compared with that of Atlanta, the capitol of the state, which shows improvement in the white health but, unfortunately, an alarming retrogression in Negro health.

We cannot vouch for fairness or accuracy of the Atlanta record, but the Savanah Health office has maintained an unassailable record for system and anthenticty, and its distinguished head has always manifested a deep, helpful interest in the physical welfare of the Savannah Negro and upon many occasions, has asserted that interest in our behalf and commended us when we made advances.

During the past year the new system of house drainage has been widely extended over the city, improving the sanitary conditions greatly, and removing many of the sources of infection and contagion. To this agency, perhaps, the above splendid showing is primarily due. Agitation, health education, as carried on among the people, has had much to do with securing these satisfactory results, too, and all agencies and organizations engaged in this work have reason to feel encouraged and inspired to continue their laudable work.

According to the compiled record colored people appear to be almost immune to diptheria,—hitherto so fatal to the whites—only six of the total of 83 cases reported, being colored, and only one death. The development of diptheria antitoxin has rendered this dread malady easily curable, there being only three deaths for the year for that cause, one less than for 1915.

In 1915, there were 33 colored deaths from malaria fever, while in 1916 there were only 23, while from typhoid there were 13 in 1915 as against 17 in 1916.

Forty-two Negroes died of pellagra in 1915, as against only 19 in 1916, a decrease of over 50 per cent.

Tuberculosis is still the dread scourge of colored people, while the white race seems to have passed thru its period of great fatality and appears to be reaching the immune stage. During 1915, the number of colored deaths from tuberculosis was 197, while in 1916 there were 135, a decrease of 62 or over 30 per cent. There were 28 white deaths in 1915 against 31 in 1916, a slight increase.

This dread disease, due directly to poor housing and bad sanitation, shows healthy improvement with room for greater improvement. Like the typeriod records, that of tuberculosis seems to bear a direct relation to improved drainage conditions.

In addition to the above, it is to be noted that there is a marked decrease in the general total of infantile deaths and still-births.

It is about time we are deriving some of the certain benefits of the Federal Government's pure food law, the state laws, prohibiting "cure-all" patent medicines and the anti-narcotic law, the local ordinances regulating the milk standard, the tuberculin test for cows, the care of restaurants, cafes and the screening of fruits on public sale, the covered garbage can and the disposal of garbage, weed-cutting, etc.; and, may be, we are.

And we must not become weary in well doing. While we are grateful at improvement we must not let up in our campaign for better sanitation and better health, because these lead to better economy and greater efficiency in every way. There are many sore spots in the city, particularly in the Negro districts of Yamacraw, Frogtown and the Fort,—Spots which may easily be remedied in some helpful degree. Now when the city is unable or refuses to help in specific instances, the people, themselves, through their organizations of various sorts, in self-defense, must take up the job. The ministers from the pulpits must teach the lesson of better conservation and lead the way in practical community improvement. Other local community organizations must do the same, and it is the business of all these to take up specific nuisances and menaces with the proper city authority, upon occasion.

We made a visit to Yamacraw a few days ago for the purpose of studying housing and sanitation there. It would be impossible to exaggerate the awful conditions there. In one case we found a steady flow of water thru a narrow lane, which lane is the only means of access to a number of small apartments at the closed end of the lane. Such a nuisance capable of initiating and aggravating disease, could be easily remedied by an interested hand. It is needless to recount the over crowding, dilapidation and filth. What is needed now is to set in motion some agencies for correcting or improving the trouble.

The Urban League, through its mission, has begun a campaign of education and religious training, and the city at the instance of the league is soon to open a play ground, which will help some. Dr. Harris, representing the league, has given illustrated lectures on tuberculosis and other health subjects in many sections. But a great deal more must be done to change the complexion of a bad situation. Great improvement will be noted there when the people are made to see the danger of living under present conditions, and the advantages of greater cleanliness. Introduce a few bright spots in these sections, organize the people for home improvement and educate them in the ways of better living, and it will not be long before these efforts will show greater results in the Health Office.

STATE

COLUMBIA

MAR 5 - 1917

TO KEEP UP FIGHT ON TUBERCULOSIS

Meeting to be Held Tomorrow Night—Want One Thousand Members.

The open meeting of the Richland county anti-tuberculosis camp organization will be held tomorrow night at 8:30 o'clock in council chamber. Gov. Manning has been asked to preside. Short addresses will be made. J. O. Van Meter will speak on "Our Problem." Fred D. Hopkins, field secretary of the national association for study and prevention of tuberculosis, will speak on the "Relation of Our Work to the Work of the State Anti-Tuberculosis Association." Other citizens who are keenly alive to the value of the work undertaken and carried on at the Richland camp will be called on. One subject to be discussed is "What Are We Going to Do For Our Negro Tuberculosis Population?" The aim of those interested is to secure at least 1,000 members. Active workers in the association pay $1 a year. Contributing members will pay $5 or more, as they desire. The membership committees will meet today and tomorrow at 12 noon at room 100A Palmetto building.

Health—1917

Montgomery's Health Record For Year 1916

Montgomery

Exceptionally Good One

Advertiser

Death Rate Lowest Since 1909, According to Report Just Made Public by City Commission

1-24-17

Montgomery's death rate for the year 1916 is the lowest since 1909, according to the annual report of the Health and Sanitary Department of the city which was given out by Dr. Walter Brooks, chief Clerk, Tuesday morning. Commissioner Stough is at the head of this department.

The death rate per thousand, based on a population of 42,000, is 16.92, as compared to the death rate of 21.26 in 1915.

The report in full follows:

"The decrease in the death rate is something we feel proud of, as it shows the lowest by 178 since 1909, and a decrease over the preceding year of 182.67 less white and 115 less negroes.The rate per thousand, based on 42,000 population, is 16.92, as compared with 21.26 in 1915. Included in the above are 75 non-residents, 66 whites and 9 blacks. The death rate of whites, including non-residents, based on 22,000 white population, is 12.5; exclusive of non-residents is 9.95. Among the negroes based on 20,000 is 21.5, there being only 9 non-residents which would not change the rate materially.

(Associated Press.)

"Births only show a slight increase over 1915, the increase being 8., 1915, 652; 1916, 660. Infectious diseases reported were less than ever before, 127 all told. In 1915 there were reported 378 cases. I desire to call your especial attention to typhoid fever, last year there were reported 24 cases, in 1915 70 cases showing a decrease of 65 5-7 per cent.

"I also desire to call your attention to the death rate of typhoid fever last year. We had only 12 deaths, 33 1-3 per cent. less than 1915. Of the deaths reported, 7 were white and 5 were blacks. Four of the white deaths were patients brought into the city for hospital care, thus leaving only three resident white deaths. Of the five negroes two or three of the death certificates had the following notation 'Only saw patient once just before death.

"The most important not only from facts to be shown but on account of considerable discussion having arisen last year in regard to infant mortality, I beg to submit the following figures: Total number of deaths under 1 year of age, 80; less by 18 than any of the preceding years and 42 less than 1915. In the 80 deaths are included 37 premature births. There were 24 whites and of these 18 were premature; these excluded, leave 6 deaths against 345 births, showing a rate of 17.3 per thousand births, 56 blacks, less 19 premature births showed 37 deaths against 315 births showing a rate of 117.

"Combined rate exclusive of prematures, 43 deaths, 660 births—65.1 per thousand births. Rate for total, 80 deaths, 660 births—121.2 per thousand births.

Sanitary Conditions.

"The reduction in the death rate is due to two factors. The first and most important is sanitary conditions. In the fall of 1915 the suburban sections of the city were thoroughly cleaned and have been kept in that condition. The sanitary standard set at that time has been maintained with Montgomery cleaner than ever before in her history. With an alert corps of sanitary inspectors with a given territory and changed frequently inspires them to leave their respective territories in the best possible condition.

"Secondly, the operation of a free dispensary in the hands of a competent physician and run along business lines. In support of the above I submit the following detailed statement. In 1915 there was 343 white deaths and in 1916 there was 275 and in 1915 there was 551 negro deaths and in 1916 there was 436, showing a difference of 67 less whites and 115 less negroes.

"There were treated by the city physician during 1916 the following patients: at dispensary, 6,071 negroes, 496 whites. At their homes were treated, 711 patients, police headquarters 157, in hospitals 263, the majority of which were major surgical cases as practically all minor surgical cases are treated at dispensary.

Cost of Treatment.

"I want to call your attention especially to the cost of treating the above 7,698 patients of which 568 were white and 6,262 were negroes. Hospital expense, $3,352.75, charity prescription $1,436.55, dispensary supplies $949.44, physicians salary $1,500, gasoline allowance $90.00, making a total of $7,228.74, or exactly 93.9 cents per patient for medical and surgical services, medicines, hospital and supplies furnished, the cost of same items for 1915 being $11,542.37, and 1914 was $9,177.80. I now wish to mention the efficient and diligent services in operating the city dispensary rendered by Dr. Jake Hinderer.

"T. J. STOUGH,
"Commissioner in Charge Health and Sanitary Department."

Health Talks

By DR. J. W. PIERCE

BAD TEETH AND HEALTH.

The first factor in the process of digestion is the thorough mastication of the food before swallowing it. By this method the food is broken into such particles, and is so subdivided, that it renders the necessary help to the stomach and other organs engaged in this most important function of the body; because, upon the natural and normal physiological disposition of the food after it enters the mouth, depends the integrity of the tissue structures whose growth and development result from food elements. In proportion as the food is delivered to the stomach in such shape that the stomach process is not embarrassed and intimidated in the same proportion contributions are made to health and its maintenance.

The stomach and its associated organs are supposed to do their part in rendering food suitable for absorption and nourishment, but they were not intended by nature to perform the work of other organs that have the function of dealing with the food in the rough. Their work is delicate, and there is what may be termed a refining process in keeping with the demands of the tissues. So, mastication, or thorough chewing of the food, is the first and most important factor in disgestion of the food that enters the mouth in a solid or semi-solid condition.

To have good mastication, then, there must be good, sound and healthy teeth. I realize that I am trespassing upon the province of the dental surgeon, but since there is such a close professional analogy between the physician and dentist, this breach is permitted, with necessary apologies. There is no good reason for hoping for perfect undisturbed health with bad teeth. That is, teeth that are broken off, that are undergoing decay, that have large cavities, that are jagged, that are loosened and present many other appearances inimical to health and its conservation.

You may set it down as a rule, with some few exceptions, that bad teeth spell bad health, because they are allies of the enemies of the human constitution. They are well fortified forts, whose interiors are invulable, unless the whole teeth is removed or rendered useless by skillful maneuvering by the dental surgeons, they manufacture a gas that will vie with any poisonous gas for supremacy in its deadliness; and they are always victors over health, unless they are forced to relinquish their position.

There are at least two reasons why bad teeth, or no teeth, are detrimental to health. The first is that they can't cut the food up into such a way as to be mixed properly with the juices of the mouth, preparing it for gastric (stomach) digestion. In the second place, they undermine health, because those who are so troubled postpone their meals rather than undergo the pain and discomfort of attempting to masticate their food. Meal hour is unhallowed to them rather than welcome. From this cause people begin to grow thin and emaciated from lack of proper nourishment. As a result nerve and muscular energy is gradually reduced and one becomes a specimen of pity. All sorts of mental habits are established, and such persons frequently lose their respect or regard for life and society.

In view of what has been said, reason suggests that those who possess bad teeth, or no teeth, should see that man who is a surgeon dentist, and who is indeed a friend of everyone who suffers from bad teeth. He is willing and ready to put you on the path to health, so far as good teeth are concerned.

CHATTANOOGA GETS TUBERCULOSIS WARD

2-12-17

County Will Spend $10,000 In Making Provisions For Negro Consumptives.

The Indianapolis Ledger

(Special to The Ledger)

CHATTANOOGA, Tenn., Feb. 10.—John Stagmaier appeared before the city commission last week to urge that the city render support which would make possible the erection of a Colored ward at Pine Breeze. He stated that the finance committee of the county court would recommend that the county appropriate $10,000 to this purpose if the city would do likewise, and explained that since the city had already given $2,500 only $7,500 more would be required.

He stressed the fact that the need for a Colored tuberculosis hospital was urgent, and that a site had already been secured which was ideal for this purpose. At the conclusion of his talk, Commissioner Betterton stated that the board naturally felt kindly towards this work and moved that Mr. Stagmaier be assured by vote of the commission that if there was any way to comply with his request that it would be done. This motion carried and the city attorney was instructed to ascertain what procedure could be employed to extend the aid needed.

More White Defectives Than Negroes, Asserts Report of Dr. Adkins

Journal

The board of education received with great surprise Thursday afternoon at their meeting in the Chamber of Commerce assembly hall the information from the report of Dr. W. N. Adkins, former medical director of schools, that 74.6 per cent of the white children in the city public schools were physically defective, and that only 36.6 per cent of the negro children were lacking physically.

Dr. Adkins' report was from September 1, 1916, through March 1, 1917, and reads as follows:

L. M. Landrum, Superintendent, Atlanta Public Schools.

Dear Sir: As per your request, I beg to hand you herewith report of the work done in the medical inspection department up to March 1, 1917, at which time my resignation as medical director was effective:

WHITE GRAMMER SCHOOLS.

Number schools examined	42
Number pupils examined	14,561
Number pupils physically normal.	3,690
Number pupils physically defective.	10,871
Number pupils recommended for treatment	6,115
Percentage physically defective...	74.6%

COLORED GRAMMER SCHOOLS.

Number schools examined	14
Number pupils examined	4,453
Number pupils physically normal.	2,847
Number pupils physically defective.	1,606
Number pupils recommended for treatment	858
Percentage physically defective...	36.6%

Work in the dental clinic started actively on February 12, and up to March 1 there were 175 visits made to the offices of the dentists engaged in this work. At that rate, it is decidedly obvious that this clinic bids fair to be a great success.

With every good wish for continuous success in the system, I beg to remain,

Yours very truly,
DR. NEVIN ADKINS.

March 22, 1917. 3-22-17

SPLENDID EXHIBIT

The Health Department of Savannah must justly feel a pardonable pride in the splendid baby welfare exhibit which it has so well prepared and which has been on exhibition for the past two weeks—first at the De Soto, for the whites and during this week at Cuyler Street school for colored people.

Savannah Tribune

3-24-17

It is about the splendid character of the exhibit itself that we wish especially to speak. We have given much study to exhibitions of this kind—the figurative and picturesque expression of the vital facts of life in all its phases—and, ordinarily it has been our observation that the complexity and difficulty of interpreting the facts and comparisons has well-nigh defeated aims and ends. No so, in this exhibition however. One is at once struck with the simplicity of the charts, conveying the dread story of disease and death; there is a marked simple emphasis in every feature of the one great story and the graphic illustrations carry the facts home with serious impressions.

The work, both design and execution, reflects great credit upon the department of which Dr. Brunner is the head. It demonstrates the high efficiency of this great cog-wheel in the municipal machinery and accounts for splendid results which Savannah has been achieving in health lines. in securing pure milk and pure food, and in practically eliminating certain diseases

which used to be thought almost characteristic and necessary to this section.

The Health Department has been a great help to the colored people,—so particularly the victims of disease and poor living conditions, and we are pleased to note that our people are more and more taking advantage of the help which the health department is anxious to render. We can begin to see the coming of free clinics for poor colored people. a tuberculosis sanitarium and a strong building ordinance to prevent overcrowding of houses and to prescribe a comfortable and sanitary type for tenant purposes.

We are glad our people turned out in such large numbers to view the exhibit and to hear the splendid lectures. We are very grateful for the many sacrifices which the whole corps of Dr. Brunner's staff so willingly and zealously rendered.

The great masses of colored people are urged to show their appreciation of these splendid efforts in their behalf by putting into execution the scores of little things which they may do so easily, by thinking just a little—things which affect our well-being so vitally.

More Tolerance Needed.

The better housing of negro domestic servants is a problem Atlanta has to meet. Why not begin now?

The other day a thoughtless Atlanta woman, discussing the fire, and the negro sufferers, remarked: "I just told my washerwoman, who was burned out, that if she would take my clothes and wash them and stop telling her tale of woe, I would pay her and she would have a week's wage to start with."

This woman did not stop to realize that the washerwoman had no place to take the clothes to wash them. She had no fuel to build a fire; she had no tubs, no soap, no water, absolutely no facilities with which to start her business washing, or she would have been quite independent of this generous patron, who was willing to pay her for the work she—the washerwoman—would do.

Now, I know perfectly well that many of the negroes who comprise the domestic element of this city are trifling; that they are not industrious and that they take advantage, too, of generous employers. I know many housekeepers are painstaking, patient and tolerant with their help; that they do not take advantage of them; that they pay them a generous wage; that they are considerate of them in every way, but I also know that there are other housekeepers who are not so considerate, and who make little or no effort to look after the comfort of deserving servants.

I shall not go into the servant problem here, in its various angles; the subject of the just wage, and measures that should be taken to classify the trained and untrained servant; the necessity there is for an association of women to deal alone with the problem of domestic labor; the rights of the servant to better her conditions when she can, and the necessity for a clearer definition of the requirements of a cook, a house maid, a waitress, a nurse, a personal maid, etc., because at this moment the more timely question is the better housing of the negro labor of the community.

Can't there be a well-concentrated effort on the part of Atlanta's good housekeepers in this direction? Can they not be influential in getting the property-owners of the fire devastated district interested in building more sanitary homes for negroes of the serving class? If the idea of doing it for the protection and help of the negroes does not appeal, perhaps the idea that more sanitary homes for negroes is a greater safeguard to the white family, would appeal.

POOR HOUSING.

Comparatively few of Atlanta's homes, even those of more recent construction, are in the accommodation for the negro servants employed in and around the household. Those houses which are not of more recent structure have a so-called servant's room somewhere in the back yard which may have no connection with the waterworks of the premises, and now such homes have very few of the old-fashioned wells open for use. This means that the servant who comes into the house can not easily be sanitary, and meet the demands of personal cleanliness. But even the back yard servants' room is a better provision than the houses occupied by the servant element in districts such as that attacked by the fire the other day.

Hundreds of negroes are huddled into badly-constructed houses, where germs breed despite the efforts of the more careful negro; where diseases contagious and infectious continually prevail and where the sick lie among the well ones, waited on by the very hands which wait later upon the little white child in the homes where the negro may be employed.

How many housekeepers in Atlanta know where the butler who hands them breakfast has been housed all night? How many of them know where their clothes have been kept for the days of the week they have been kept by the washerwoman into whose home they are brought? How many of them know what is the matter with the washerwoman's husband who lies sick in the house, and to whom gifts are sent? And how many people know that three members of the washerwoman's family are in the tuberculosis hospital for negroes?

"Troubles enough!" I hear the housekeeper say, who shirks trouble at her door, but this is a time when everybody may as well face every situation as it is. This question of better housing domestic employees is directly up to the community, and it would seem but the rational thing that some steps be taken immediately to at least start a movement for better quarters for the negro in the new quarters which will undoubtedly be constructed for him.

It is a moment in world history when human life is being measured as our most valuable asset, and when a great deal of unselfishness is going to have to be practiced in dealing with every problem which relates to saving human life before any other interest is considered. This relief work we are doing is very fine, and very necessary, but can't somebody begin a movement that will go beyond temporary relief for the negro and give him a start on a permanent basis—give him a place to live in that will insure his better condition and insure his relation to the white household being a safer one?

Rome was not built in a day, nor will Atlanta's burned district be built in a day. Let us hope, therefore, that some thought and some humane and unselfish thought is going to be given to the better housing of the domestic serving class among the negroes.

Rockefeller Foundation Aids Alabama

Through an agreement reached yesterday afternoon between Dr. S. W. Welch, State Health Officer of Alabama and Dr. John A. Ferrell of the International Health Board, Alabama has the way opened for a sanitary survey of every county in the state with the services of medical and sanitary experts to be paid by the Rockefeller Foundation, which supports the International Health Board, which is fighting disease all over the world.

Rockefeller Foundation Helps

By the terms of the agreement, over which Dr Welch is much pleased, the International Board will pay all the expenses of two units consisting of medical officers and sanitarians, who will be on duty continuously in this state and will be at the service of any city or county desiring their services.

The State of Alabama agrees to keep one unit in the field at its own expense.

Intensive Sanitary Campaign

This agreement makes possible an intensive sanitary and health campaign, throughout the entire state. All that is necessary is for the people of the various communities to ask for this assistance in making their neighborhood sanitary and healthy and for the Boards of Revenue to promise their cooperation.

This work has already been started in Etowah and DeKalb counties, and with the outside assistance now to be given to the State by the International Board, it will be possible to cover the entire state.

These units to be sent here, will teach the people home sanitation, the care of milk, will examine water in various localities for typhoid and other germs. Anti-mosquito and fly campaigns will also be carried on.

The work of the new units will commence immediately, their first work being done at Oneonta.

NEGRO HOSPITAL SITE PURCHASE IS PASSED UPON

NEW ORLEANS TIMES PICAYUNE
DECEMBER 13, 1917

Mrs. Isidore Newman Gives $100 to Fund for the Institution.

Wednesday was a lively day for the negro hospital fund, witnessing the passing of the act of sale for the purchase of the site of the Provident Sanitarium and Training School for Nurses at 2517-2519 Delachaise street, and the receipt of cash donations by The Times-Picayune for $155, making the total fund in hand $2184.

One of the donations was for $100 from Mrs. Isidore Newman, who always has been a liberal contributor to worthy causes. Others were Attorney Armand Romain, $25; "B. K.," $2; S. Nathan, $10; Dr. J. J. Wymer, $5; George W. Glover, $5; Mrs. T. Marshall Miller, $5; "R," $2, and Miss Bertha Jennie Berlin, $1.

Passing of the act of sale for the purchase of the site occasioned rejoicing among members of the board of administration of the hospital, who are the leaders among the negro race in New Orleans. It was passed before Rene C. Metoyer, negro notary public. The charter also was signed and filed with the recorder of conveyances. Those present at the signing were Albert Workman, president of the board; Professor Albert Wicker, financial secretary; Dr. J. T. Newman, dean; Walter L. Cohen, vice-president, and Jose Morales, who was among the first to volunteer financial aid to the hospital. The pen with which the act was signed was presented to Albert Workman, who will preserve it as a souvenir to be placed in the hospital upon its opening.

The board of administrators will meet Thursday night in Longshoremen's Hall to appoint a building committee to look after plans and specifications for the erection of the hospital building.

The woman's auxiliary recently held a meeting and appointed committees to arrange for an extension of the campaign among the negro women of New Orleans.

Three of the donations received Wednesday were brought to The Times-Picayune by Walter Cohen. These were the contributions from Dr. Wymer, S. Nathan and "R."

The donations thus far received to the fund by The Times-Picayune follow:

Previously acknowledged	$1933.50
James A. Holtry	10.00
Rabbi Max Heller	2.00
Moses Overton	1.00
Judge M. S. Mahoney	1.00
Miss Aspasia L. Gates	1.00
G. R. Smith	5.00
Alphonse Kahn	2.50
F. Rivers Richardson	25.00
J. Aron and Company, Inc.	25.00
Jennie L. Downing	2.00
F. P. Levy	25.00
Lehman, Stern & Co.	25.00
F. P. Levey	5.00
"B. K."	2.00
Armand Romain	25.00
S. Nathan	10.00
Dr. J. J. Wymer	5.00
George W. Glover	5.00
Mrs. T. Marshall Miller	5.00
"R."	2.00
Miss Bertha Jennie Berlin	1.00
Mrs. Isidore Newman	100.00
Total	$2155.00

OUR HEALTH TALKS AND FARM TOPICS

The Journal and Guide

Beginning with this issue The Journal and Guide begins a department of health talks, dealing with personal hygiene, sanitation and preventive and remedial measures for the conservation of health. The department will be conducted by Dr. J. W. Pierce, of Dendron, Va., a progressive and highly capable young practicioner, whose situation in the heart of the most thickly populated rural district in the State eminently qualifies him to deal with the health problems that concern the masses of our people. About one-half of the thirty thousand readers of The Journal and Guide live in the rural districts, and this department, edited by Dr. Pierce, should be of great benefit to them as well as to the other half who dwell in the cities of Virginia and the Carolinas.

Next week we will begin a department devoted especially to farmers and their wives and children. This department will be conducted by Prof. John D. Wray, Negro Boys' Farm Club Agent for North Carolina. These two new features are inaugurated in line with our purpose to make The Journal and Guide of more service as a race newspaper. It is our purpose to pursue at all times a constructive policy and this can be accomplished in no better way than in promoting better health, better homes, better farms and better schools among our people.

SAN ANTONIO EX LIGHT
NOVEMBER 11, 1917

FEW NEGROES UNFIT

Army Recruits In Better Condition Than White Men.

Negro recruits are showing better physical condition than are the whites, according to records of the office of Licut. Col. P. S. Halloran, 90th division surgeon. Of 3822 negro recruits so far examined by the special board of medical examiners who passed upon the physical fitness of recruits, only 76 have been found unfit for service. This percentage is much lower than the percentage of rejections of white troops, Colonel Halloran said.

"This is due to the fact most of the negro recruits are laborers, and have not led sedentary lives which many of the white recruits lived before being called into service. They are for the most part active, and have lived much in the open."

Health—1917

HEALTH DEPARTMENT

EDITED BY

DR. R. T. HAMILTON

The Dallas Elpius 2-10-17

GEORGIA ODD FELLOWS' HEALTH BUREAU.

Bulletin No. 29.

Healthful Hints on Health and Sanitation.

By Dr. E. J. Brinson.

(Continued from last week).

That mankind may become more healthy, may become stronger physically aond mentally, the offspring must be better. To have better offspring all people contemplating marriage should be sure they are absolutely free from disease that might effect the physical or mental condition of their offspring. Veneral or social diseases in the parents have much to do with the physical and mental condition of their children. These diseases in the parents are often responsible for deformed children, blindness in children and grown people, still-births and mis-carriages. A child born of consumptive parents has a poorer chance in life than one born of healthy parents.

Give the baby after it is born the best chance to win in life, keep the home absolutely clean. Don't allow the baby to crawl over dirty dusty floors. Don't allow it to play over filthy playgrounds. Have it sleep always in a screened crib where the flies can't get to it, but at the same time the ventilation will be abundant. I have seen so many people put the baby on the floor or bed and throw a quilt over its head and face while it sleeps to keep the flies out of its face. This is a sad mistake. In this way the poor innocent, helpless child breathes, rebreathed poisonous air which is bad for it.

Have your homes screened. If you can't have the whole house screened, have your cook room and dining room screened anyhow. Flies passing from back toilets, cow pens, horse lots, dead animals, garbage cans and decaying vegetable matter may carry and leave disease germs that will eventually cause prolonged suffering, misery and death, the cost of which in dollars and cents will be very much more than the cost of screens to your homes to keep out these troublesome pests.

The members of the order are hereby requested to put forth special effort this year beginning with the year to eliminate tuberculosis from its ranks and thereby contribute largely to its elimination from the race. Beginning the new year, 1917, every member of the order is requested to screen his home and swap every fly that happens to get by the screens; to keep the premises absolutely clean that threre will be no breeding places for flies; to keep the home spotless by clean and demontrate that we are the cleanest people on earth; to use individual drinking cups and towels; to wear no one's clothes but, your own; to live, sleep, or study in rooms where there is no dust, and where there is plenty of ventilation; not to eat anything that other people have eaten off of and left; not to eat stale food; to walk about 3 miles a day; not to carry soil handkerchiefs in the pockets; to take daily baths; to clean the teeth with clean water and a good tooth brush after each meal; to eat moderately; not to dissipate; drink whiskey, beer or smoke cigarettes; to sleep at least six or seven hours out of every twenty-four.

It is revolting to stand here at my home in front of the express office and look at the large crowd of Negro men and women in line to receive whisky they have ordered. They tell me that the poor ignorant creatures are cursed and roughly handled by those in authority at times but like poor hungry hogs after boiled corn they stand in line waiting patiently with juicy mouths, and take any abuse just to waste their hard earned money for the rotten booze with which to undermine their own health and poison their germ plasm, causing their offspring to come into the world very susceptible to disease and with a strong tendency to loose corrupt morals, and a debauched integrity. What is true, I guess, of the Negro here, is true of him at other places where he is promiscuously found nearly every day here the express office is crowded with them. They are thickest on Saturdays and Mondays. Some Negro are bad about using other people's names to order in and I'm told they'll use the names of people dead and those who have been gone so long they are almost forgotten.

COMMON SENSE HEALTH TALKS No. 4

Ajax Americus 9-29-17

BY E. MAYFIELD BOYLE, M. D.

CHANGE OF SEASON

With the advent of cold weather there is evident a train of ailments which was practically unheard-of during the summer.

This is the time when old cases of "rheumatism" begin to give notice that they have barely been dormant, not cured; when neuralgic pains of the sides and back and limbs may cause more or less alarm; when cramps, resulting from female disorders of recent or long standing, may cause more or less discomfort; when colds-in-the-head or coughs may give clear signal that the summer is overpast and winter is approaching. That these and many other bodily inconveniences are due to "catching cold," there is no doubt about it; but that all of them can be successfully avoided is a truism which many do not realise and which others ignore.

Cold a Terrible Danger

As simple and harmless as a cold may seem, it is one of the most dangerous foes to health imaginable. Not even a "head cold" should be trusted or given a season of entertainment, so as to speak. From the nostrils to the bottommost parts of the lungs is a continuous cavity, larger in some parts than in others, but, nevertheless, vitally correlated. A simple "cold-in-the-head," if neglected, will not only ultimately extend to the throat, causing sore throat or tonsilitis or quincy or diphtheria, but may dip into the wind pipe, cause laryngitis or bronchitis or any of the pneumonias. Consumption may follow a slight cold, a bad cold or a neglected cold, depending whether the germs are in the lung or its adjacent parts. Various cavities of the head may be involved at the onset or as a complication of a "head cold." But catching cold is not confined to the head or air passages. For instance, one may catch cold in one's kidneys or bowels and thus start tuberculosis of the bowels. To harbour a cold and say "I am always with a cold," or waste valuable time in trying useless home remedies or the various nonsensical stuffs often advertised at this time of the year for sale is literally gambling with one's health. The result is often disastrous. To send for the doctor or call at his office after the cold has enthroned itself supreme and the vitality given hostage to a relentless pneumonia or tuberculosis is the pitiable lot of many a victim whose sad fate has served but a heedless warning. The intention of saving the doctor's fee and drug bill often leads to a larger compulsory expenditure at the hands of the undertaker. To deal loosely with a cold is like harboring a frozen rattlesnake in one's bosom.

Danger Signs of a Cold

Whenever a cold lingers, either from neglect or after proper treatment; when a cough is occasional and "sticks," the appetite is low, the weight falling and emaciation shows itself by prominent collar bones; when the face begins to grow hollow and pale, the lips bleached and dry and the cheek bones becoming more and more visible, there is trouble---serious trouble--- "in the camp." It is not "malaria" nor a mere "run-down." Don't consult the neighbors about it; don't take beef, wine and iron---its all rot. You need a doctor and need one badly. This is as true as the gospel.

What to do With a Cold

This is as simple as a b c. Never rest until you get rid of it. To regard a cold as a matter of course is oftentimes an invitation to severe illness if not death. If it were natural to be with a cold everybody would have it at all times. Promptly attacking a cold is the best way to get at it; but it must be attacked in the proper way by competent physicians, not by druggists. Should it linger in spite of treatment, never be discouraged, never rest at ease until it IS GONE. The longer it remains the more should it be regarded with suspicion.

Another way of avoiding a cold is by wearing proper clothing.

But, alas, how can the ladies do this with any sense of up-to-dateness when they are compelled, at fashion's behest, to make visible, a la negligee, all that seems to lend so much charm to feminine attractiveness and beauty? It is in conforming to "the latest style" that the laws of health are frequently violated. By the use of proper clothing there will be less cold contracted. Proper ventilation, day and night, prevents easily catching cold. Making fires in time, that is to say any time it is cold and not until Thanksgiving, can not be too strongly emphasized. Corpses are better kept cold; but really live people must be warm. Au revoir.

EDWARD MAYFIELD BOYLE.

BIRTHS FAR EXCEED DEATHS FOR JUNE; PLEA FOR RECORDS

The Montgomery Advertiser

Importance of Birth Registration Urged By State Board of Health

9-3-17

For the month of June, according to a statement given out by the state board of health of Alabama on August 1, there were reported 2,618 deaths; 1,256 white and 1,262 negro. The total death rate was 13.3; white, 9.9; negro, 17. There were reported 3,698 births; 2,459 white and 1,239 negro. The total birth rate was 18.8; white, 21.2; negro, 15.4.

The highest death rate is reported from Jefferson county, which is 23.3; the lowest, 4.1, from two counties, Blount and Henry. The highest birth rate, 32.0, is reported from Cherokee county; the lowest, 8.9, from Houston county.

Plea For Registration.

The board has sent out a plea for birth registration.

"Never in the history of this country has this question been of such vital interest to so many people as it is today," it says, and strongly urges every citizen to register his own birth and the birth of every member of his family.

It gives a plan, since there are no records prior to 1908, as follows:

"Secure a birth blank from your health officer and submit to him evidence to substantiate your statement of the date of the birth to be registered. An original family record or an affidavit from a reliable person will be accepted as sufficient evidence. The certificate, when complete, must be filed with the health officer, who will put it on record, and send the original to the office of the state board of health for permanent filing."

May Get Copies.

The board says certified copies of birth and death certificates may be secured at any time by application to the registrar of vital statistics, Montgomery, Ala., and cautions that from this date doctors, midwives, and parents should see that every birth, including the full name of the child, is registered with the proper health officer immediately.

The following is the board's compilation of statistics on reportable diseases for June: Typhoid fever, 313 cases, 64 deaths; malaria, 134 cases, 47 deaths; small pox 50 cases, 1 death; measles, 525 cases, 48 deaths; scarlet fever, 37 cases, no deaths; cerebro spinal meningitis, 3 cases, 2 deaths; diphtheria, 21 cases, 6 deaths; pellagra, 303 cases, 127 deaths; pulmonary tuberculosis, 288 cases, 225 deaths; infantile paralysis, 2 cases, 1 death.

Bulletin On Paralysis.

The board has mailed to health officers a document of the United States public health service, "Poliomyelitis," in common parlance, infantile paralysis, which treats of what is known of its cause and modes of transmission. In connection with the pamphlet, the board suggests the following to the health officers:

1. Urge the prompt reporting of all suspicious cases.
2. Verify the diagnosis yourself and make immediate report to this office.
3. Screen all cases against insects and exclude household pets from the sick room.
4. See that the body discharges from patients are thoroughly disinfected.
5. Bear in mind that infection may occur through contaminated food.
6. Isolate all cases at least three weeks after symptoms subside.
7. Should a case occur in a school, it is better to inspect each day than to close the school.
8. Discourage the intermingling of children in every way possible, and advise against children traveling.

ONE OF THE LESSONS.

It sometimes requires a hard lesson in the school of adversity to teach us lessons that cannot be learned otherwise.

One of the lessons taught by the conflagration that has just swept a large part of the city is the menace that ever threatens the city from shingle roofs and from frame dwellings, which, in a large part of the burned district, were so constructed as to prove veritable tinder boxes when once in the reach of nearby flames.

Much of the district devastated by the fire had been developed years ago into beautiful residences occupied by many prominent and well-to-do citizens of Atlanta. This was particularly true of the Boulevard, Jackson street, Highland avenue and the intersecting streets. That part of the city was built on an elevated plateau that has for many years been regarded as a favored residential community.

Surrounding it, however, especially on the side toward the city and in the direction of Oakland cemetery, were hundreds of small frame houses, most of them in a dilapidated condition, and practically all of them shingle roofs. These houses, generally speaking, were occupied by negro renters, and many of them were scarcely fit for human habitation. They were not only a menace in the danger of fire to that part of the city, but worse than that, sanitary conditions were such as to menace the very health of the city itself.

When once the fire got into these dry tinder boxes, parched by the several weeks drouth, the whole fabric went down like a row of card houses.

Had all the houses in this particular district been covered with either slate or other non-combustible roofing, it is entirely probable that the fire would have been kept within a limited area.

Council a year ago passed an ordinance that there should hereafter be no shingle-roof houses. Then, after having done a good thing, it very promptly took the back track and either rescinded this order or delayed the time when it should be put into operation.

At its very next meeting it should now pass upon this question flatly and finally, making it impossible hereafter to cover any building in the city of Atlanta with other than what is generally termed as non-combustible material.

There are still hundreds of negro tenant residences—so called by courtesy—that are built on both sides of the valley between the burned district and Peachtree street. They were saved solely because the wind was blowing in the other direction—away from, and not toward them.

Had a shift in the wind once turned the fire into this district, with the wind sweeping toward the city, God only knows what would have been the result!

And yet the menace remains and a fire is likely to occur in the thickly crowded hovels of that section at any time—and the next time the wind may not play favorite with the business section of the city.

Nor is that particular section of the city the only one which is a constant menace to the city itself.

The same condition prevails in the valley that reaches from Orme street to the Technological school athletic field. A fire in the negro hovels there might be far more disastrous in its spread than Monday's holocaust. The same thing is true along Elliott street—almost within a stone's throw of the Terminal station—and further out in the western section of the city there are communities in which conditions are equally threatening.

Indeed, there is not a ward in the city in which this menace, to a greater or less degree, is not ever present.

There are thousands of hovels, termed residences, which are not worthy of the name, and which are owned by people who should be ashamed to collect rent for them.

The city of Atlanta could not do a better thing than to institute a searching investigation into these conditions with the view of taking steps to remedy them.

It would be a big undertaking, but there never was a wider field for intelligent research, nor a better opportunity for remedial action, than in this suggestion!

FIGHTING MALARIAL FEVER.

The State Board of Health of Louisiana is undertaking with the co-operation of a large number of assistant surgeons of the United States Department of Health to make a malarial survey of the Pelican State. The plan is to "visit the various centers of Louisiana to point out the conditions that tend to the prevalence of malarial fever and to show what is needed to crush out the disease by securing the co-operation of all citizens in the good work."

The Charleston News and Courier wishes that a similar campaign might be inaugurated in South Carolina. "The cost to the State of the ravages of this disease, comments the News and Courier, "which is caused entirely by the bite of the anopheles mosquito, is very great, both in money and in mortality." "There is no one factor," continues the Charleston paper, "in the life of this community which contributes more to discomfort in the summertime and which is a worse health menace than the mosquito." So, destroy this dangerous pest!

The State Board of Health of Alabama contemplates a campaign of intensive sanitary work in the counties of Alabama. In the annual report of that board issued recently we find this interesting paragraph touching the work the boards hopes to get under way:

"By this kind of work is meant the selection of one or more communities in a county, covering an area of about twenty-five miles square each, with a population of from 700 to 800 persons, and sending sanitarians into such communities for the purpose of teaching the people the laws of health. This is to be done by public lectures, demonstrations, and by visiting each home and pointing out to the inmates thereof wherein existing conditions violate said laws and how they may be remedied. This kind of sanitary work is now deemed the most advanced and effective that can be done, and with the aid of the United States Public Health Service and the International Health Board is now being carried on in selected counties in a few of the states."

NEW YORK'S "FOUNTAIN OF YOUTH."

The New York Herald, which, like several of the Manhattan journals, seems really to like New York, even goes so far as to argue that one may live a long and useful life in that city. Taking for its text the centennary celebration of a New York woman, The Herald celebrates New York as "the city of perpetual youth," the "fount that Ponce de Leon sought in Florida."

The Herald introduces evidence to sustain its eloquence in the weak places. as follows:

While the juvenile Miss Patterson was preparing for her centenarian's party, Mr. Joseph H. Choate, at eighty-five, was making three and four addresses a day and running around with Mr. Horace Porter, eighty, to banquets and receptions at night. Mr. Elihu Root, seventy-two, started to dash off to Russia to be godfather at the christening of a baby democracy, while Mr. A. Barton Hepburn, seventy-one, and Mr. Jacob H. Schiff, seventy, were breaking the eight hour day law gathering funds for the Allies. Lieutenant General Nelson A. Miles, seventy-eight, ran up to compare Billy Sunday's sawdust trail with the old Indian trails he used to travel, and Mr. John D. Rockefeller, also seventy-eight, shoveled out $800,000 to aid American war relief. Dr. Abraham Jacobi spent his eighty-seventh birthday visiting patients, while out in the suburbs Mr. Thomas A. Edison, seventy, was working twenty hours a day to make his mark "somewhere off Heligoland," and Mr. John Burroughs, eighty, started a kindergarten class in agriculture.

Not one of these distinguished persons was born in New York City. They migrated to the metropolis to find a place in the sun. To find that place self-discipline, hard work, regular hourus were ordained. Men that achieve as well as these have achieved, have no time for idle dissipation and frivolity These men took sound constitutions with them when they moved to New York to help do the city's thinking.

The New York man of affairs, who usually was born somewhere else, knows less about the pace that kills than some of his contemporaries who have more time for reading signs on the great white way.

NEED FOR NEGRO TUBERCULOSIS WARD IS SHOWN

DALLAS TEX EVE JOURNAL
SEPTEMBER 19, 1917

The need for a ward for negro patients at Woodlawn Hospital, county tubercular hospital, was never more in evidence than this morning, according to Dr. R. S. Loving, Assistant City Health Officer, who reported that a young negro man had finally been accepted at the county institution.

The negro, although he had money, was compelled to sleep on the ground near the old Katy Railroad depot last night. He could find no place where he could rent a room, he told Dr. Loving. He went to the Emergency Hospital this morning, Dr. Loving said, and begged that some place be furnished him.

With tears streaming down his face, he raised his voice to an audible whisper and said that in the nine years he had lived in Dallas he had never asked for help. He is in the grip of tuberculosis and has but a short time to live, Dr. Loving said.

After a consultation over the telephone with Dr. Loving, Dr. Gilbert, County Health Officer, agreed to furnish the negro with a bed and permit him to sleep in the yard at Woodlawn. The young man expressed pleasure and went to the hospital.

Thirteen Deaths In Montgomery During The Week Just Past

Thirteen deaths were recorded in Montgomery during the week ending Saturday, April 7, according to the weekly report issued by Dr. Walter Brooks, chief clerk of the health department of the city. Of the thirteen persons who died here during the week six were white and three of these non-residents.

The names and ages of the persons who died during the week in this city were as follows:

White—Fannie Dorsey, aged 65 years; Evelyn Porter, aged 6 years; Mary Margaret Weldon, aged 1 year; Hugo Schloss, aged 70 years; Lucy A. Butler, aged 70 years; Serena J. Washburn, aged 82 years.

Colored—Nancy Preston, aged 31 years; Carrie Watts, aged 18 years; Israel Moncrief, aged 58 years; Alberta Jackson, aged 25 years; Percy Jones, aged 36 years; Billy Powell, aged 19 years; infant of Maggie Starks, aged 7 months.

Health — 1917

DR. SOBEL ACCUSED OF SLANDERING RACE

New York Age
12-4-17

Dr. Charles H. Roberts, the well known dentist, takes exceptions to the erroneous statements made in an article written by Dr. Jacob Sobel of the Health Department, recently published in the daily press, in which Dr. Sobel undertook to intelligently discuss "The Mortality of Negro Babies in New York City." "Dr. Sobel's article causes one to thing that he has gone out of his way to create an unfavorable impression about colored people," said Dr. Roberts to an AGE representative. "In this respect it is in keeping with most articles written by white men concerning colored people. It must detract to deserve attention.

"Dr. Sobel bases most of his discussion on statistics. We accept his statement in regard to the mortality of colored babies in New York City, but when he attempts to make it appear that similar conditions obtain with reference to the mortality of the colored people as a race, he is mistaken. In the South it is not known what the colored population actually is, let alone what causes the death of Negroes. The statement is usually made that they die from tuberculosis, syphilis or alcoholism. In most cases death certificates are not required.

"In the first paragraph Dr. Sobel says that colored people die faster than the white people regardless of whether they live apart and under the conditions peculiar to themselves or among and with the white population.' One naturally wonders how the doctor made his comparison. There is no part of this country in which the colored live among and with the white population. Dr. Sobel knows full well that colored people are segregated everywhere in the United States and are forced to live under worse conditions (sanitary and otherwise) than other citizens or foreigners.

Shows Lack of Knowledge About Negro.

"After having discussed at length infant mortality he concludes that 'the points of attack on the problem *in the case of the colored population* are: illegitimacy, syphilis, tuberculosis, alcoholism, etc.' I should like to know if the 'points of attack' would be different in the case of the whites. Class for class, conditions being the same, whites suffer from the diseases mentioned above in the same proportion as colored people do.

"Again the doctor makes the wrong impression when he states that 'one cannot escape the conviction that at present there is something inherent in the colored race which renders them more susceptible to the inroads of disease.' He states further: 'We feel that even if conditions among the whites and Negroes were the same the infant mortality would be higher among the latter because of this lack of racial resistance.' Here Dr. Sobel shows his lack of knowledge of the colored race from a physical point of view. As a matter of fact the colored man's physical stamina and power of resistance are unsurpassed.

"Two processes served to increase the inherent vitality which already existed when the American Negro was taken into captivity; the process of selection and the process of elimination. The slave trader selected and captured when possible the best physical specimen to bring to American slave markets. The slave trader's method of transportation and the after treatment of the slave by the American slave owner constitute the process of elimination. The slaves were herded like cattle on the ships, shut in hot, close quarters, many to die of disease, suffocation and hunger, so that only those with great power of endurance survived. The American slave holder pursued with increased severity this process of elimination by driving the slave without pity and without mercy. The surviving of the ordeal was only by dint of physical stamina, for only the fittest could survive.

Negro's Resistance and Recuperation

"In addition to this state of forced physical perfection the Negro was endowed with a happy state of mind. This rugged bodily condition, combined with an easy mental state, counted well to the advantage of the American Negro. Again, the American Negro baby was breast fed to a greater extent than any other American, and American slave owners practiced eugenics among their slaves.

"In regard to the power of resistance and the recuperative power of the American Negro, Dr. DeWitt Bellinger Casler has this to say: 'We have often talked about the matter of the resistance and recuperative power of the Negro race after operation, and I have no heistancy in saying that with a rather large experience, I can state as my belief that the powers of resistance of the Negro race and their ability to recuperate after severe operations are greater than among the white. In the gynecological work with which I have been especially associated in the wards of Johns Hopkins the recuper[illegible] ers of the black race after operation have often been a matter of comment and is a very wellknown fact.

"This statement coming from Dr. DeWitt Bellinger Casler, one of the most noted gynecologists of America, needs no comment. Dr. Sobel's article would have served a better purpose had it been confined solely to scientific facts.

The Address Delivered at the 26th Annual Tuskegee Negro Conference by J. W. Davison. Managing Editor of

The Atlanta Independent

The Atlanta Independent
1/27/17

Ladies and Gentlemen of the Tuskegee Annual Conference:

I understand that today is set apart for the workers who journey here each year to discuss the best ways and means of promoting the best interest of the race and developing the most useful and helpful character as a contribution to American civilization along the lines suggested, taught and lived by the lamented Booker T. Washington.

We are called upon to discuss health conditions among our people with a view of decreasing the death rate, and in a general but effective way of preventing disease. As a secret order man, I am called on to discuss it from the secret order standpoint. I am frank to admit that I do not know a better way to discuss it or to make more helpful suggestions than to quote from one of the bulletins issued by the Bureau of Health of District Grand Lodge No. 18, G. U. O. O. F., America, Jurisdiction of Georgia, incorporated, by our Dr. Eugene J. Brinson, Assistant District Grand Medical Examiner and Director of the Bureau of Health of the Grand United of Odd Fellows, Jurisdiction of Georgia.

Dr. Brinson is an eminent physician and scientist, and those who have kept up with the bulletins issued by him semi-monthly in the Atlanta Independent, know of their worth and value as health hints, and will join me in saying that they will prove of more benefit than anything I might suggest, and I submit to you his suggestions, which have appeared from time to time in bulletins issued by him in the Bureau of Health of the Georgia Odd Fellows. We in Georgia feel that it is as much our duty to improve the health conditions of the members of the order as it is their financial, moral, and intellectual condition, because with healthy bodies and clean minds, we can best protect the financial, moral and intellectual conditions of the race. Thus we submit you Dr. Brinson's suggestions.

Secret Societies are charitable institutions formally designated by our people to look after the sick and bury the dead. They are in reality auxiliaries to the church, doing a great part of the material work of the church. They should, therefore, be aided and encouraged by the church.

Now-a-days secret societies, in their effort to keep pace with the wheels of progress, and to increase their sphere of usefulness, have decided that their duty is not only to look after the sick, bury the dead and pay to the bereaved an endowment, but that a part of their duty, which is equally as important or more than the former, is to prevent sickness among their members, to conserve and secure their health by spreading literature among them, educating them in the rules and regulations governing health.

The secret societies are really the best channels through which the Negro can best be reached with information relative to his health and sanitation. For this reason, if for no other, every Negro who is of proper age and a good physical risk should belong to some secret society, and every secret society sould have a Bureau of Health with a most capable physician in charge to furnish printed matter monthly or semi-monthly on topics of health and sanitation that most vitally concern mankind. There are so many diseases to which mankind is heir, that are both communicable and preventable that may be averted by putting daily into practice certain rules and regulations in living.

These rules and regulations should be persistently taught by printed circulars issued to the members of the order by the Health Bureau, and the Negroes shoul be urged with emphasis to make them their every day habits and practices of life. The Negro has not learned the value of fresh air both day and night; neither has he learned of the vitiating destructive influence of intemperance. Authors teach that the intemperate succumb to disease more readily and withstand its terrors less than the temperate and that the children of temperance people are stronger (all other things being equal) physically, mentally and morally than those of the intemperate.

In ignorance, and probably with the thought of saving expense, the Negro crowds too many in a room with improper ventilation, and soon they are breathing rebreathed, poisonous air, which is said to be very productive of disease, particularly consumption, in that the resisting powers are lowered. This simple rule of ventilation is laid down by the scientists as being conducive to health by keeping the air ordinarily pure in a room: For every person in a room, there should be 24 square inches of space provided to admit fresh air. Through the channel of secret societies, by printed matter periodically distributed, the Negro should be taught how to keep well.

The records in Georgia show that nearly 5,000 people in the state die annually of tuberculosis, a large majority of whom are colored. The best authority says this is a preventable disease; that if certain simple rules of living are strictly observed, it can be thoroughly eradicated from the human family. It is the business of the secret societies, through their Bureau of Health, to teach these rules; to urge upon their members not to live, study or sleep in rooms where there is not fresh air. Great stress is put by the scientists on foul air due to unsanitary housing and overcrowding with a lack of sufficient air and light in living apartments, shops and factories, as a cause of disease, particularly consumption; that fresh air and sunshine kill disease germs, particularly those causing consumption; that mankind should be taught not to live in a dusty air; to keep the room clean; to get rid of the dust by cleaning with damp cloths and mops; not even to sweep with a dry broom; to air the bed rooms at least two or three times a day; to keep a window partly open in the bed room at night, and never to eat with soiled hands.

What better channel is there for such information as this to flow to our people than secret societies, whose purpose in organization is charity? In rendering such a service the secret societies are doing a great part of the church work. They are proving to be great benefactors of mankind.

The records also show that three times as many prisoners die of tuberculosis as free men. This is true largely because of the hardships and privations of prison life, because of the mental depression from homesickness, the very thought of prison life, the physical exhaustion, the utter ignorance of the rules and regulations of health and sanitation, and a lack of the facilities of properly observing them.

Consumptive germs are often promiscuously scattered by one consumptive prisoner o nthe floors and walls and bedding of tht prison to be taken up and infect the others that follow. In this southland a vast majority of the prisoners are colored. When the promising young men of our race enter such unsanitary prisons, they become an easy prey of this disease, and on being inoculated with this disease, they scatter it among those of the race with whom they come in contact.

Is it not the duty of secret societies to get hold of the youth of our race and teac hthem the high and most exalted principles of life and character and thereby save them from the clutches of the criminal courts and from a prison life of misery, degradation, suffering, shame, disgrace and disease?

There are so many ways in which the Negro takes disease that could be avoided, provided he was properly instructed and would stic kstubbornly to the instruction. He is an easy prey in a multiplicity of ways to other people. He will purchase for wearing apparel for himself and family disease-germ-laden, second-hand clothes from other people, never giving the probability of taking disease a thought. He will eat the food left by others with much alacrity and drink, especially strong drink, with even more joy and satisfaction from the vessels and bottles used by the sick or well, and thereby exchange with them mouth secretions, often taking disease. All of this must come from base ignorance.

The secret societies are the organizations to serve the race with enlightenment along this line, make better its sanitation and increase its usefulness, its wealth, its health and its respectability.

BIRTHS IN ALABAMA EXCEED DEATHS FOR THE YEAR OF 1916

Advertiser 4-8-17

Annual Report of State Board of Health Shows Interesting Statistics—Wants All-Time Officer

The annual report of the State board of health for the year 1916, which was the last year during the administration of Dr. W. H. Sanders as State health officer, shows the total number of deaths in the State for the calendar year to have been 24,306, making a rate at 10.4 per thousand of population. white deaths numbered 12,495, and negroes 11,811.

The number of births was 54,190, showing a rate of 23.4 per thousand. White births numbered 35,158, and colored, 19,032. Thus, while the excess of white births over deaths was 23,663, colored births showed an excess of only 7,211. The highest birth rate was 36 per cent in Winston county, the lowest, in Macon county, where it was 11.6 per cent. In deaths, the highest rate was 18.6 per cent in Madison county; the lowest, 3.1 per cent, in Clarke county.

Marriages And Divorces

The number of marriages in the State for the year is given at 25,848, of which 13,054 were white and 12,794 colored. The total number of divorces is given at 1,331. The number of illegitimate births is given at 305 white and 2,603 colored, totallinga bout 5.5 per cent of all births.

The total population of the State for 1917 is estimated at 2,354,670, of which 1,388,235 are white and 966,435, colored

The report states that during the year no widespread epidemic prevailed in Alabama, and that local outbreaks were promptly controlled and suppressed.

All-Time Health Officer

The report further speaks of the neccessity of an all-time county health office for each county of the State.

"Firmly convinced that such policy is absolutely essential to the most successful operation of the public health system of the State," says the report," "the board proposes to continue its efforts in this direction and appeals to all public spirited citizens to render whatever aid they can in securing its accomplishment.

"The board ventures to suggest that public meetings and contributions to the papers of the counties would constitute efficient means of advancing the cause.

In Five Counties

"While the commissioners have for many years possessed the right of appropriating such salaries as are now urged, the last legislature made the law more specific than before, hence the only thing now to be done is for commissioners to avail themselves of the privilege they possess. In five of the counties of the State the commissioners have already done this, and not only are they themselves, but the doctors and the people are greatly pleased with the result. It can be safely asserted that commissioners and people of all other counties that follow the leadership of the counties referred to will be equally delighted with the result."

Intensive Sanitation

A campaign which the State board of health has ben anxious to get into operation is what is called intensive Sanitary work. According to the report "by this kind of work is meant the selection of one or more communities in a county, covering an area of about 25 square miles, each, with a population of from 700 to 800 persons, and sending sanitarians into such communities for the purpose of teaching the people the laws of health."

In this connection, it is stated that the Rockefeller International Health Board, which financed the campaign successfully carried out several years ago against the hookworm in Alabama, stands ready to render financial aid in the new campaign for better sanitation.

The report further contains a vast amount of information on health conditions through the efforts of the State board of health, and educational and inspection trips which representatives have made in various parts of the State.

Failure Is Criminal

The desirability of prompt notice being given upon the discovery of a case of communicable disease is shown. On this the report says:

'Could the first case of communicable disease always be recognized and prompt notification thereof given, in many instances a second case need not occur.

"The doctors and the people should be deeply aroused on this subject and made to realize that the criminality of failure to give notice of the presence of any of these diseases is only equaled by that of failure to arouse the sleeping inmates of a house discovered to be on fire at midnight."

Health Talks

By DR. J. W. PIERCE

Post 6-21-17 Herald Journal

OVERDOSING ONESELF.

In a previous talk on health, we took occasion to discuss in a brief way the overdrugging of infants and children, trying to set forth some of the evils that attend such practice. Now we will consider the overdosing of oneself as carried on by the adult. This is, indeed, a very bad habit and it works against health, producing conditions just the contrary to those expected by self-administration of medicine. We don't refer to those drugs such as morphine, cocaine, etc. against which there is legal restriction which is working untold good for the classes —especially that class who are miserably weak morally—but we have in mind those drugs and medicines against which there is no restriction or curtailment, and are used quite frequently by the ill advised.

Standing above all in the list, are the purgatives and laxatives which are much abused, and which keep a great army of adherents constantly on guard maintaining their dignity in the common experience of men and women. There are great many men and women who are actually slaves to this class of drugs, and at the same time undermining and injuring health. Not only are the purgatives and laxatives indicted, but many others that are used with ease and freedom by the common mass of people for any and every little complaint. As in the children also in the adult that often the physician is called upon to treat and relieve a drug disorder which had been established by meddlesome "doctoring."

Purgatives and laxatives are a class of drugs, the influence of which is exerted upon the stomach and intestines. In their use they serve to correct certain conditions existing in the stomach and intestines of which one complains. After desired results are obtained, discontinuance of the drugs is imperative. But this is not the case with this large host that use them whether or not. All ailments to this class of people have their origin somewhere along the alimentary canal and therefore a purgative is in order. As a result several things more or less take place.

In the first place, where purgatives are taken freely and indiscriminately, normal intestinal activity is perverted, and a fixed bad physical habit is formed that cripples nature's process of getting rid of things that are in the intestinal tract, and are at variance with good health. Where in some instances it was used for the first time occasionally for interference with the regularity of intestinal activity for removing certain wastes from the tract the frequency with which it is used, creates a permanent condition of inactivity which requires a resource to purgatives almost daily if certain results are obtained.

In the second place, purgatives weaken and paralyze the action and function of the intestinal glands that are concerned in secreting a fluid to assist in keeping the tract in proper shape. This is brought about by over-stimulation from the use of large quantities of purgatives and laxatives.

Again, the influence, of purgatives used very often, produces bad prominent results upon the digestive process, thereby disturbing the general health by lack of proper nutrition. In this particular, not only the alimentary canal or tract suffers, but the general tissues of the body through failures due to overdosing the tract under false notions of needs and demands.

Purgatives have another effect of reducing the fluids of the tissues by their too frequent employment. There is always a certain quantity of fluid in the tissues to meet the requirements and when purging is carried too far, it vitiates the physical economy. Any drug taken beyond a certain limit is directly opposed to the best interests of the constitution of the body. And I don't know of any practice of taking medicine, than the one of adults of charging themselves, so often, with purgatives and laxatives. Their mistake in overdosing themselves is just as bad as that of over-drugging their children.

The same question resolves itself into this, that wherever persistency is imperative for administration of drugs, the method should be under skillful direction. This is safety first as well as "preparedness."

ANTI-TUBERCULOSIS WORK

Negroes Conducting Campaign Against White Plague.

Constitution 4-19-17

The negro committees engaged in carrying out the medical educational campaign met at Big Bethel church on April 16, 1917, at 3:30 o'clock. H. H. Pace, president of the Negro Anti-Tuberculosis society, presided over this meeting. He appointed the following women as supervisors of the visiting work for the whole city:

Mrs. John Hope, general chairman; Mrs. J. B. Greenwood, Mrs. C. C. Cater, Mrs. J. O. Ross, Mrs. Clarence Robinson, Mrs. F. P. Raiford, Mrs. Mattie Ford, Mrs. Wimbish and Mrs. Ludie Andrews.

The city of Atlanta has been divided into nine districts. Several chairmen have been appointed in each of these districts, and at the meeting yesterday the streets were assigned to the different groups, whose duties it will be to visit in each house.

Literature was furnished these workers for distribution in the various neighborhoods. It was also announced that the first clinic will be held at Neighborhood house, near Spelman seminary, on every day during the week, beginning April 30.

The doctors of the negro medical society will give their service in conducting these clinics and the Negro Nurses' club will give their service in aiding in the clinics.

The following districts have been outined for intensive work:

First Ward, A—Bounded on north by Simpson street, east by Western and Atlantic railroad, south by West Hunter street, west of Ashby street.

First Ward, B—Bounded on north by West Hunter street, east by Southern railroad, south by Central of Georgia, west by Ashby street.

Pittsburg and Mechanicsville—Bounded on north by Whitehall, east by Windsor, south by University place, west by Hobson and Humphrey streets.

Fourth Ward, A—Bounded on north by East Pine and Angier, east by Boulevard, south by Georgia railroad, west by Courtland street.

Fourth Ward, B—Bounded on north by East avenue, east by Southern railway, south by Georgia railroad and Decatur street, west by Boulevard.

Sixth Ward, A—Bounded on north by North avenue, east by west Peachtree, south by East Cain, west by Luckie street.

Third Ward, A—Summerhill—Bounded on north by Georgia railroad, east by Grant street, south by Little street, west by Capitol avenue.

South Atlanta—Bounded on north and east by Southern railway, south by Brown street, west to city limits.

Edgewood District—Including all of the negro sections in the neighborhood of Edgewood and is without boundaries. Clinics are to be located in each of these sections described. Committee of women will work up the community in preparation for these clinics.

HEALTH OF CITY IS SHOWN AS EXCELLENT IN REPORT FOR MAY

Advertiser 6/22/17

The report of the sanitary and health department of Montgomery for May indicates a small number of infectious diseases, tending to show that the health of the city is excellent.

Seventy-four burial permits were issued. Twenty-four of these were for whites, divided as follows: Males, 11; females, 13. There were fifty deaths of blacks, as follows: Males, 17; females, 33. Six of the whites were non-residents.

13 Infectious Diseases.

The infectious diseases, 13 in all, were as follows: Measles, 8; scarlet fever, 2; pulmonary tuberculosis, 3. The number of rooms fumigated during the month was forty-seven.

Births registered show a total of 46, divided as follows: Whites, 31, of which 19 were males and 12 females; blacks, 15, of which 8 were males and 7 females.

Work of Department.

The number of patients treated at the city dispensary was 767, divided as follows: Whites, 37, of which there were 22 males and 15 females; blacks, 730, of which 294 were males and 436 females. There were 10 visits made to the police station and 90 visits to homes, making an actual total of 867 patients treated by the city physician.

The superintendent of garbage collection removed from the streets 2,118 loads of garbage and other refuse matter and filled in 14 open wells. The report also shows that 7,600 premises were inspected by 4 inspectors. The monthly average per man was 1,900, and the daily average per man was 72. Three arrests and convictions were made.

Health — 1917

DECREASED DEATH RATE.

The Journal and Guide

According to the report of the Norfolk Commissioner of Health for the month of November it appears that the city's Negro death rate from tuberculosis is decreasing. The reduction according to figures of the Health Commissioner is from 562 per 100,000 to 418. A saving of 144 lives in a population of 100,000. This is encouraging, in view of the causes of the high death rate from tuberculosis among Negroes, and the evident tardiness with which these causes are being remedied or removed. These causes were set forth in a recent editorial in the Virginian-Pilot, which we printed in our "Public Opinion" column last week, and which we feel are timely enough to warrant reproducing in part in this article.

"In comparing the mortality rates among the whites and blacks, consideration must, of course, be given the habits of life of the latter and the conditions under which they live—habits which are extremely difficult to improve and conditions which are to be remedied only by the slow process of time and education. But when all due allowance is made on these scores, it does seem that we are falling short of our duty some where when the death rate among the colored population is nearly three times as heavy as among the white—21.6 as against 7.8 and 24.9 as against 9.3 per 1,000. Just what we are leaving undone that should be done, we do not undertake to say; but it may well be that conditions would be materially improved if tenement-owners could be induced to better the character of the dwellings in the colored districts and some means were devised of enforcing upon residents in the colored sections a greater and more general regard for sanitation.

"The matter, it is almost needless to point out, is one in which the white population has a selfish as well as a humanitarian interest. The prevalence of disease in one section of a city always and inevitably more or less of a menace to the health of all the other sections, and particularly is this so in our case, because of the close relations into which the whites and blacks are necessarily brought through the employment of the latter by the former as cooks, nurses, housemaids, butlers, janitors and in other capacities. In suih circumstances it is only to state the obvious to say that to promote in every practicable way healthfulness among the colored population is a duty which we owe to ourselves no less than to them. In proportion do we consult self-protection as well as humanity."

NEGRO DEATHS OUTNUMBER BIRTHS

RICHMOND [illegible]
JULY 3, 1917

Of the 231 deaths during the month of June, 129 occurred among the colored population and only 102 among the white. The births were 82 colored and 188 white. Which shows 47 more deaths than births among the colored people and eighty-six more births than deaths among the white residents.

The chief causes of death, according to the bulletin of the city health department, were consumption, apoplexy, organic heart disease and Bright's disease. The latter carried off more whites than any other disease, whereas tuberculosis was the chief cause among the colored race.

There were three deaths from whooping cough, one white and two colored; two from tetanus, or lockjaw, one white and one colored; one white from erysipelas; one white from pellagra; ten from cancer, five white and five colored; four from old age, of which three were white; two from suicide, white; three legal executions, all colored, and nine others, four white and five colored, died violent deaths.

Bright's disease claimed eleven white and three colored; consumption, ten white and thirteen colored; apoplexy, ten white and twelve colored, and organic heart disease, ten white and twelve colored.

Asks Doctors a Question.

Dr. Roy K. Flannagan today sent the following card to all physicians in the city:

"In the month of June twenty-six cases of diarrhea were reported to this department. Thirteen of these are now dead, a 50 per cent. mortality.

"Is not this too high a reath rate to represent the true facts?

"Have you reported all the cases of enteritis in babies you have seen? If not, please let us hear at once."

Negro Makes Statement Of His Side of Situation

Editor Constitution: In your editorial columns of recent date you carry an article from the eminent medical authority, Dr. W. A. Evans, on "Mortality Among Negroes," but neither you nor the eminent doctor gives the facts in the case; that is, you do not tell how the city authorities clean up and look after the sanitary conditions in the parts of the city occupied by white people, while negro sections are left practically unnoticed, in "mud puddles" to get along as best as possible.

Constitution

In most negro districts the trash carts, etc., are lucky if they get around once a month. If negro citizens were given the same sanitary protection that is given white people the death rate would not be so high.

In regard to the negro going north, I will say that the negro is thinking, and that is the very reason he is going, and you may write all the editorials and appoint all the committees, etc., you wish, but they will continue going until they receive better treatment at the hands of the south.

5-15-17

Committees now investigating this problem could secure a little better treatment in the street car accommodations for negroes if they would induce conductors to be as prompt to have white people to move forward in the car so that a negro may sit down as they are to have negroes to move back for whites to sit. You can daily see white people scattered out over the car with negroes standing and no effort is made to have them obey the law, but conductors never hesitate to have negroes to obey the law.

The police officers could treat the negro a little more like he is a human being. Whenever it becomes necessary for an officer to speak to a negro or order him to move, etc., he usually speaks to him like he was addressing a wild animal.

Please publish this so that if there are any white people who really want to help the negro they will know how to go about it.

I do not take time to discuss the school facilities; they are already well known.

THOMAS J. ALBERTS.

Atlanta, Ga., May 11.

MORTALITY RECORDS MADE PUBLIC BY SANITARY OFFICER

advertiser
10-28-17

About Equal Number of Deaths Reported to City Health Department

Mortality among the whites and blacks broke almost even in Montgomery during the week ending Saturday as shown by the weekly report of the sanitary department. Out of a total of 24 deaths, 11 were white persons and 13 negroes. The deaths recorded by the department for the week follow:

Whites: John H. Sims aged 1 year; Robert F. Coughlin, aged 19 years; Seaborn N. Hanks, age 45 years; John M. McClain, age 48 years; Mary Louise Stratford, age 79 years; William J. Murphy aged 65 years; Geo. H. Austin, aged 79 years; Minnie Brown, age 41 years; Edgeworth E. Bryan, age 40 years; Jas. W. Jones age 71 years; Charles C. Cox, age 3 months.

Negroes: Jim Nixon, age 32 years; Mary Robinson age 44 years; Helen Golden, age 47 years; Elijah Mulin age 49 years, Mattie Watson, age 40 years, John Baskin, age 25 years; Mattie Fortson age 19 years; Annie Shepherd, age 36 years; Lawrence L. Motley age 5 years; Martha Smith age 56 years; Tom Perry age 55 years; Lucinda Coleman age 93 years;. Cyrus Goodson age 28 years.

WE REALLY CLEANED UP

3-10-17.
Savannah
Tribune

The clean-up "bug" has been around the whole week, with a spirit and a fervor, seldom witnessed. We have really "cleaned". Early in the week, nearly every where, there were signs of launching the campaign, evidences of the aroused interest of the people in the state-wide campaign.

Practically every colored minister, every colored teacher, many leading individuals not included in these and practically all organizations took an active hand in the campaign. Sermons were preached, resolutions were passed, literature distributed and many articles and essays written on "Clean-up" topics, for the purpose of impressing the people. Representatives of the Urban League were active and made many visits to schools and other organizations, tours of inspection and distributed literature.

Co-operation for the purpose of improving the health and beauty of the city was urged upon all classes and generously was responded to.

Good results have been obtained, in education in the advantages to be derived from cleanliness, comforts, increased attractiveness of home and surroundings, improved health and a more beautiful city.

Inspection by competent persons revealed excellent results to all the people.

EVENING POST
New York City
FEB 19 1917

HEALTH SURVEY AMONG NEGROES.

400 City Nurses Making House-to-House Visits in Colored Sections.

More than 400 nurses from the Department of Health are making to-day a tour of inspection through the colored sections of the city, which comprise the Harlem and Columbus Hill districts. The object of these house-to-house visits, it was learned to-day from one of the health officials, is to secure information which is considered essential to the improvement of the health among negroes. Similar surveys have been made previously in other parts of the city, and to-day's activities are the outcome of recent conferences between the health officials and prominent representatives of the colored population and officers of the National League on Urban Conditions among Negroes.

As many of the negroes are employed at early hours it is probable that before a complete census is obtained, the work must be carried on until late to-night. Special attention will be given to the high rate of infant mortality.

A week ago pamphlets were distributed among the negroes, explaining what was to take place to-day in order that they should be prepared to answer all necessary questions as intelligently as possible. Negro physicians and pastors have cooperated with the Health Department along this line, and last Sunday proper instruction was given to the congregations of the various churches.

SHREVEPORT [illegible] TIMES
JUNE 20, 1917

Chandler Compliments Shreveport Negroes

Dr. G. C. Chandler, health officer of Shreveport, has some nice things to say about the way the residences of negroes here are being screened.

"I wish to express my appreciation of the co-operation given to the board of health, by the colored people of Shreveport," he says. "A personal inspection has shown that practically all of the colored homes in Shreveport are in first-class sanitary condition with about 90 per cent of these homes screened. This will necessarily mean better health and fewer deaths among the colored people. The screening alone, by keeping out the flies and mosquitoes, should mean a great reduction in the death rate among them.

"I wish to impress on the people the importance of keeping the screen doors closed and swatting promptly every fly and mosquito that gets within. This must be done if the best results are to be obtained.

"I wish to further impress on those who use water barrels, that these barrels must be screened and the water drawn from a bung hole or faucet near the bottom of the barrel."

THE AMERICAN COLORED MAN IS NOT CONSIDERED COMPETENT TO LOOK AFTER THE HEALTH OF HIS RACE—COLORED DOCTORS WERE NOT CONSULTED BY INSURANCE COMPANY.

The National Council of Colored Workers Will Investigate Our Public Schools.

We Shall Demand That Places Employing Colored Help to Be Sanitary, and Hours Reasonable.

By Rucker Smith.

Here is an item which appeared in the Kansas City Times November 1, under this heading:

"DISCUSS NEGRO SOCIAL WORK.

Conditions Under Which Some Live Disgraceful, Physician Says."

The article says, in part:

"The Negro problem was discussed exhaustively at a meeting of social workers, health officers and officials of the Metropolitan Life Insurance Company held last night at the Hotel Muehlebach. Dr. C. W. McLaughlin health director for Kansas City, Kan. described the conditions under which the Negro population was forced to live as disgraceful, and said the men who invest their money in real estate must be taught to prepare better homes for Negroes."

It is hardly necessary to ask why are these white people so interested in the Negro's welfare. We all know that the Metropolitan Life Insurance Company carries hundreds of Negroes in their company. The death rate is too high among Negroes for them to make their sought for profit, so they call for help from the city's health department. While I am very thankful towards this company for its efforts to help the living conditions of the race, I also feel that it is our problem, the Negro's problem, even though we are not working at it. We are so easily lulled to peaceful satisfaction by our great leaders in their oratorical stunts of "We have made the greatest progress of any race ever come out of bondage." If this was true it would be a great star in our crown, but history does not prove it.

For a race to succeed it must control its own destiny, but in this conference at the Muehlebach, like most grave questions concerning the race, we were not consulted, not even one of our physicians was present at this meeting. In all of our important affairs connected with the City, State or Government, we have nothing to say; we are treated as separate people; we have no representative. In this progress? The white man looked after our affairs before the Civil War and he is still doing it. Any Colored man or woman who feels that they would like tot help better conditions for the race, knowing full well that it cannot be done single-handed, should join with us in our struggle to raise the standard of living, both moral and industrial.

Here are some of the things we shall attempt to do at once: Investigate our public schools, factories, laundries, in fact, every place where Colored men and women are employed. If we find that our schools are not properly conducted, or if we find unwholesome conditions in any of the places employing Colored help, we shall demand its correction. We shall try to find places for our boys and girls out of school, if we have to call on the race to build and operate them. We shall meet Sunday, November 18, at 3 p. m., at Mr. Hopkins' real estate office, 1315 East 18th street. The public is invited.

W. M. BONNER, Secretary.
MRS. S. E. HART, Chairman.

SANDERS RESIGNS AS HEALTH OFFICER; WELCH IS ELECTED

After Serving Aabama Almost 21 Years, Ill Health Causes Dr. Sanders to Step Aside

Dr. W. H. Sanders, who for nearly twenty-one years has been health officer of Alabama, resigned Tuesday, and the State committee of public health elected Dr. S. W. Welch of Talladega, to succeed him and to serve out the unexpired term, ending April, 1919.

Dr. Sanders succeeded Dr. Jerome Cochran in 1897 and has been in continuous service since that time. Dr. Welch has been a member of the medical association of Alabama for many years, and has served for ten years as a member of the State committee of public health.

Ill Health Cause.

When interviewed, Dr. Sanders said that although his health has for the past year kept him from being as active in his work as heretofore, he has not felt that the public health interests of the State have suffered on this account, because of special facilities at his command for keeping in touch with the work, but, fearing that possibly this view was not altogether in accord with public opinion, he felt it his duty to the State and to the people to retire, and he so notified the board.

He further stated that he is in hearty accord with the action taken by the board, and that it is his desire and purpose to extend to his successor and to the members of the board that same loyalty and support that was always so generously given to him during his own administration.

Tribute From Dinsmore.

Dr. Dinsmore, the assistant State health officer, in commenting on Dr. Sanders resignation said:

"I feel a distinct personal loss in giving up official association with Dr. Sanders. My work with him has been uniformly pleasant and agreeable, and my intimate association with him personally has been both an inspiration and an education to me. Dr. Sanders has been in the service of the State for nearly 21 years and I know of no man who has been more faithful and unselfish in his labors throughout the whole of his public life.

"The history of his administration as health officer of Alabama constitutes an inspiring chapter in the history of the State itself. In selecting Dr. Welch the board has chosen a worthy successor to Dr. Sanders, and I predict for him a successful and efficient administration and I shall take pleasure in co-operating with him in every possible way."

HEALTH WEEK FOR VIRGINIA

The Journal & Guide

APRIL 15-21 DESIGNATED AS ANNUAL CLEAN-UP WEEK IN OLD DOMINION.

3-17-17

Movement To Be Conducted By Negro Organization Society. Twenty-five Thousand Health Bulletins Will Be Distributed Throughout State.

The Journal & Guide

Petersburg, Va.—Health Week among Negroes of Virgina will be April 15-21. This occasion will be the fifth annual Clean-Up Movement conducted by the Negro Organization Society and will be as far-reaching in its effects as have the similar movements of former years. Many thousands of our people have been helpfully affected by this effort in the interest of better health and it is the hope and ambition of those who are furthering this work that no one of us will be left out of the Clean-Up Movement of the present year.

The general program for Health Week may be outlined as follows: April 15, Health Sunday. Ministers are asked to preach sermons on Health and to bring the work of the week to the attention of their people. April 17, Health day in the schools. A prepared program should be rendered and the school premises made sanitary and beautiful. April 18-21, Clean-Up days. Homes and the premises about them should be put in a condition of complete sanitation.

A special edition of 25,000 Health Bulletins writen by the Negro Organization Society for this movement will be published by the State Board of Health. This bulletin is in the hands of the public printer and will be ready for distribution in a few days. These bulletins will explain in detail the work to be done during Clean-Up Week and should be carefully followed. They will be distributed through local agents of the Society in many counties of the State, through our ministers, farm demonstration agents, industrial supervising teachers, and officers of School Improvement Leagues. Copies will also be sent to individual and organization members of the Negro Organization Society.

The Clean-Up Movement is being worked up from the office of the Negro Organization Society at the State Normal School, Petersburg, and communications pertaining thereto or requests for Health Bulletins should be addressed to the Society at that office.

NORFOLK, VA.

DEATHS IN VIRG

It is surprising, as the news dispatches state, that the death rate among white persons in cities showed an increase for 1915, while that among the negroes showed a decrease, but just what lesson is to be drawn from it is dependent upon many facts not set forth. The decrease among negroes is gratifying if due to preventive measures wisely employed; the increase among white people is disquieting if due to lack of such measures. That there was an increase in one case and a decrease in the other would indicate the presence of exceptional causes or it may have just "happened so.' The main point is the actual increase or decrease in the total and this is not disclosed in the abstracts of the report.

A gratifying feature of the report is the reduction of the number of cases of tuberculosis. A determined effort is being made by the health authorities and the Anti-Tuberculosis Association to check this disease and reduce it to the minimum and the figures for the year lead to the comforting conclusion that headway is being made, albeit the moral and financial support accorded is not what it might be.

SEPTEMBER 18, 1917

NEGRO RACE SUICIDE HERE

Deaths Exceed Births In Records For Post Five Years.

Health Commissioner Blake yesterday gave Mayor Preston a report showing that for the last five years the death rate among negroes in Baltimore has exceeded the birth rate. His figures, taken from the records of the department and covering the period from January 1, 1912, to December 31, 1916, five complete years, were: Deaths, 12,982; births, 10,813.

For the same period Dr. Blake reported the birth of 54,483 white babies and the death of 8,899 white persons of all ages. He submitted the following table of births and deaths by years:

	White Births	White Deaths
1012	9,387	7,852
1913	10,360	7,625
1914	10,665	7,914
1915	11,460	7,525
1916	12,662	7,983
	54,483	38,899
	Negro Births	Negro Deaths
1912	2,011	2,589
1913	2,233	2,543
1914	1,972	2,637
1915	2,173	2,477
1916	2,423	2,736
	10,813	12,982

Asked by the Mayor if the table of births was reliable. Dr. Blake said it was—that the department had means of knowing that practically every birth is reported by the physician, midwife or parent.

Nashville, Tenn.

FREE DENTAL CLINIC FOR COLORED CHILDREN

The free dental clinic inaugurated by Dr. W. E. Hibbett, city health officer, and being conducted by Dr. J. L. Leach, medical inspector in the colored schools, will resume operation today at the Carter school between the hours of 3 and 4 o'clock this afternoon.

This clinic has been in operation since October and more than 1,700 tooth brushes and dental cream have been given to the children of the Napier, Nelson Merry, Hadley, Clifton and the Belleview schools.

The purpose of the clinic is to teach the children the value of oral hygiene and the use of the tooth brush. Public-spirited colored citizens have donated brushes to this cause and many of the lodges also have also donated to the cause.

Colored dentists have volunteered their services to this cause and are teaching the children many lessons along the lines of oral hygiene.

Health—1917

Odd Fellows' Health Bureau

3-24-17

That the health of mankind may become better, children in being trained for citizenship and society, must in the same proporition be trained and properly fitted for the position of parents. Juvenile culture, moral, physical and intellectual, directed in the right way and by correct methods bears favorably on the happiness of the parents themselves, yields good results in the lives and characters of the children and brings abundant dividends in strength, health and happiness of their remote descendants.

Atlanta Independent

It is reported that more persons died last year in the City of New York of chronic heart disease than of tuberculosis or cancer. The same doubtless was true in Georgia. The thought is also advanced that heart disease is largely preventable. Heart disease often follows infectious diseases and acute rheumatism. Rheumatism is a disease of the blood. It is thought now that the germ causing acute rheumatism enters the body through diseased tonsils, adenoids or decayed teeth. The removal of such tonsils, adenoids, and the proper care of the teeth seem to be the most direct and preventative measures against rheumatism. The value of out-of-door exercise and sufficient sleep in well ventilated rooms can not be over-estimated as preventative measures.

People who lead sedentary lives, whose activities are chiefly mental, who get but little out-of-door exercise and who eat more and sleep less than they should, are said to suffer frequently from circulatory changes. It is claimed that poisons generated in the body by this mode of life, coupled with poisons introduced by the habitual and intemperate use of alcohol, tobacco, tea and coffee plays a definite role in causing degenerate diseases of the heart.

Syphilis, doubtless, has a more destructive influence on the heart and general circulatory system, than any other of the infectious diseases. Our people, as a rule, seem indifferent about sticking stubbornly to a treatment when they contract this disease until they are cured, which is a sad mistake. When this disease is contracted, a good physician should be selected, his treatment should be taken and his advice followed until he dismisses the case as cured. It matters not how well the one may feel who has the disease, the advice of the attending physician should be followed in continuing the treatment until health is fully restored.

Health is said to be "the state of being sound, hale and whole in mind and body." It really means a perfect circulation and digestion; a full tonic respiration, steady nerves, virile mental states, and wholesome moods and emotions. One who possesses this state of being is really healthy. But before this condition can be attained, the habit of health must be possessed. The habit of health is like any other habit. It is born of repetition. People must get the habit of living and moving in a healthy mood. Their energies must be trained and directed in that way. It is said to be a universal law that the paths over which energy most easily travels are the paths over which energy has traveled before. It is true that actions, attitudes, mental and physical conditions, which at first are difficult, finally become easy, spontaneous and even unconscious, through repetition.

The habits of industry, honesty, sobriety and virtuous conduct should be extolled and insisted upon, but doubtless the habit that is the most primary good of all is the habit of health, and this is rarely mentioned. A learned gentleman once said that "at college, I was taught the motions of the heavenly bodies, as if their keeping in their orbits depended upon my knowing them, while I was in profound ignorance of the laws of health of my own body. The rest of my life was, in consequence, one long battle with exhausted energies." As it was with this distinguished gentleman it has been with millions of other persons who have had to fight the same battle, because of the same lamentable omissions in their early education.

Herbert Spencer in his moral education, calls particular attention to "physical sins." He says: "Every breach of the laws of health is a physical sin." The idea is conveyed by him that though we pray for mercy and acknowledge that we are "miserable sinners," we must pay the full penalty for our transgressions against the laws of health. When a pin is stuck into the finger pain is sure to follow. Cause and affect, and not mercy, reign in the physical universe. If this were always plain and easy to see; if effect swiftly followed cause, even the most stupid of mankind would be shocked into better self-treatment. But since some of the penalties are so disguised and so long deferred that when they are imposed we fail to see that they are the legitimate effect of some previous cause.

Some people are blessed with abundant strength and vitality, and it is they who often use up more energy than their vital powers daily manufacture. This must necessarily mean that they make heavy drafts upon their capital, though they keep hale and hearty for years. This condition prompts them to boast that "nothing hurts them," that they are as "touch as whit leather." There is also a class of people who cheat themselves of sleep, who eat all sorts of indigestible food, drink vile concoctions, wear clothes inartistically tight, live and sleep in illy-ventilated rooms, breathe in a niggardly fashion, habitually sit in stooped, cramped or strained positions, and, in spite of all these "breeches of the laws of health," no sudden disaster befalls them. Finally, though, at some cross roads in life, they find themselves unable to journey as they did before.

We give below some of the penalties of the physical sins: The person that has lived in bad air and breathed in a bad manner, finds himself subject to colds, an easy prey to grippe, or his circulation is poor, his heart is week. The one that fails to nourish food and abundant sleep, finds himself rheumatic, irritable, despondent—in a word, he is wrecked nervously. The wearer of tight clothes develops a sensitive stomach, or pelvic troubles, or she loses her stamina and "gives way" at anything or nothing. The person that stooped or stood so as to cramp the chest and crowd the stomach becomes unpleasantly aware that he has a liver or that his lungs are affected, or that his food does not agree with him, or that his poor back achingly protests against the burdens unjustly put upon it. In short, the whode physical organism may easily "get out of kilter" as a penalty of breaking any simple law of health in the daily use of the body. When such afflictions come upon some people they wonder what they have done that they should suffer such trouble. It is more often those things that they have left undone than those they have done until literally there is no health in them.

No one ever gets too old to form new habits. If there are those whose habits are not healthy, now is the time to change them. Psychology says: "The constant change of tissue, due to the nutritive process of waste and repair in the body, makes new habits possible to form to the latest day of life, because the new tissue sets itself naturally to the latest 'pathway' and tends to corroborate and fix the impressed structural modification."

When one has the habit of health, he has much more than the possession of health under favorable conditions. He is backed by a certain physical reliability. This positive vital quality enables him to endure much harder usage and still keep his "efficiency, equilibrium." The habit of health holds a person to normal activity under many adverse circumstances and protects him against susceptibility to malign influences. It is this habit of health that enables patients to "pull through" dangerous diseases where other persons that lacked such positive quality would go under.

People who are not in the full habit and expression of health who undergo a surgical operation or suffer from a harrowing emotional experience, or an acute disease, generally, when they recover at all, recoil to a subnormal level of endurance. Their system is so shattered by the shock, their initial stamina is so undermined by the disease that their power to fully rebound is lost. The consequence is that when such a person has recovered it is only a partial recovery. Their maximum energy ever afterwards registers at a lower notch than it did before the shock. The remark about such a person is commonly made: "He has never been the same man since that illness a few years ago." But when the system is fully confirmed in the habit of health, its involuntary response from any shock is toward normal conditions. The energy pendulum tends from force of habit to swing back to its accustomed healthy beat.

Learn the laws of health and stick stubbornly to them. Allure health to abide with you by making conditions favorable to it. Form in your mind tonic thought habits, daily vitalize every part of the body and rightly mechanically adjust and use the body.

There is a close and intimate relation between the body and

1144 N. Y. Medical Journal.
JULY 7, 1917

Prophylactic Therapy of Rickets in a Negro Community.—Dr. A. F. Hess, of New York, said that for the past six months an experiment was carried out in a colored district of New York, where the infant mortality was two or three times greater than that prevailing in the city at large. As is well known, rickets was exceedingly prevalent. It might be said to be present in a greater or less degree in almost all negro babies, involving many who were breast fed. In contrast to this, little rickets was found in the West Indies, Cuba, the Bahamas, Panama, and the Barbados, due to the fact that the diet was mainly of fruit and vegetables. He had found that in the north meat or fish or eggs were used daily and that foods were often cooked in the form of stews. He had given Norwegian codliver oil in many cases with great advantage. In thirty-two cases in which fifty-four ounces of oil was given in six months ninety-four per cent. were free; in five cases in which twenty-three ounces of oil was given in six months eighty per cent. were free, and in nineteen cases in which no oil was given only sixteen per cent. were free. Codliver oil could be dispensed at milk or infant welfare stations. The object of this study was to see whether rickets could be presented among these babies by giving codliver oil during the first few months of life. This object was achieved. In connection with this work, a rickets clinic was established in this district and it was recommended that a clinic of this kind be conducted not only in this quarter, but in other sections where rickets was particularly prevalent. Codliver oil might well be distributed at the milk stations. With tuberculosis clinics and cardiac clinics in operation it was only logical to institute rickets clinics to suit the special needs of certain neighborhoods.

Dr. J. Sobel, of New York, called attention to the fact that infant mortality among negroes was 110 per cent. higher than among whites. Inasmuch as the statistics show a low fat intake, this could be offset by providing more milk.

COLUMBIA S. C. RECORD
JULY 26, 1917

SANITARY LECTURE FOR NEGROES AT SPRING HILL

Dr. J. A. Riser, in charge of rural sanitation in South Carolina, and Dr. Leory H. Smith, field agent of that department, held a meeting for negroes at Spring Hill last night, for the purpose of interesting the negroes of the section, where a sanitary unit has been established, in the sanitary work.

Dr. Riser says that about 75 negroes attended and that they enthusiastically received the illustrated lecture which he delivered as well as the talk by Dr. Smith. The negroes are manifesting much interest in the furtherance of sanitation, he says. A sanitary unit was also established at Horrell Hill today.

mind. They act and react on each other. A learned philosopher once said: "A man's body and his mind (with the utmost reverence to both, I speak it) are exactly like a jerkin and jerkin's lining—rumple the one, you rumple the other." Another has said that "if you smooth out one, the other loses its wrinkles."

Despondency is said to show itself in a depressed chest, dragging gait, and general muscular invertness, but an animated feeling and thought, a light cheerful buoyant step and a general muscular relaxation and a liveness incline the mind away from despondency.

Get the health thought and habit and be healthy.

E. I. BRINSON, M. D.

AND STILL THEY GO.

Houston Observer 5/19/17

It is indeed encouraging to The Observer to see the position Colonel George Bailey took before the Rotary Club of this city last week on the Negro question.

The writer was in conversation with three young people recently who were wending their way to the North to forever remain because of the treatment accorded the race here and in view of that fact that better wages await them there.

The Observer has continually sounded the alarm on this exodus, which the South has tried to ignore and pass off as of no consequence.

But reports from several Southern States reveal the startling fact that practically 300,000 Negroes have gone North and with the North still in the market for Negro labor, thousands are yet to go.

It is time for the South to employ some of that energy used to hold down and harm the Negro maliciously to lifting him up by treating him humanely from all angles.

A great crisis confronts us today and men must forget color of skin and texture of the hair and regard and treat all men as men.

The Negro asks no special favors; he simply asks for a man's chance and to be let alone in his attempt to make good and demonstrate his mettle.

Is he asking too much? We say, no!

Does he deserve better treatment? We answer, yes!

Will the South accord him his just demands? We pray God that it will or else it is "good night" South for the Negro.

One of the main troubles with the American people, and especially the South, is to never see a thing clearly and fair-mindedly until it is too late.

The Negro asks for justice in the courts and in business dealings absolute fairness.

He does not crave or seek social equality, but he does desire that white men cease to insult and ruin his family and debauch his posterity by the operation of many of these hellish and damnable institutions among us.

For petty offenses the Negro is often railroaded to jail and the penitentiary and even lynched.

He can scarcely eke out an existence with the poor salary that he receives.

Educational facilities are very poor in most localities for Negro children.

There are no playgrounds, parks or other means of recreation operated for the benefit of his children.

He must live in the worst part of the community, considering both moral and physical conditions.

In some places he is still held in peonage and one does not have to go far to find this state of affairs.

Too long has the Southern white man disregarded the Negro as a man and now he is beholding the reaction.

Booker T. Washington truthfully said: "One cannot hold another down in the ditch without staying down in the ditch with him, and in helping the man who is down to rise. the man who is up is freeing himself from a burden that would else drag him down. For the man who is down there is always something to hope for, always something to be gained."

Let the Southern white man learn this truth and execute the same and then the Negro will cease to migrate.

Unless he turns about face, adopts and puts into operation a humanitarian program, the situatiin will become even more alarming and will tremendously affect the progress of Dixie.

TO CITY HEALTH OFFICER SCARDINO:

Some time ago we published in our columns a communication from Attorney M. H. Broyles to your predecessor, Dr. C. C. Green, calling his attention to the manner in which births among our people are published in the newspapers.

Since the reports are taken from the records, are we to infer that all Negro births are recorded so as to leave a doubt as to the legitimacy of our offspring?

In reporting births among the whites your department takes pains and pleasure to state "Mr. and Mrs. So and So"; but when it comes to our race, you do not even mention the father or husband's name. Houston Observer. 5/5/17.

We do not care a cent about being called "Mister," but we do contend that as a public servant—appointed to serve all the people impartially—you should be fair and just enough to report Negro births so as to leave no impressions of bastardy or illegitimacy.

Again: As a public servant you receive your compensation out of the city treasury, whose coffers our taxes help to fill annually.

Since this is true we would like to know what motive prompts your department in pursuing such a pernicious and discriminatory policy.

Do you order such of your own volition?

Are you instructed by "higher ups" to make reports in such a manner?

Or are you blindly, wantonly and thoughtlessly following in the footsteps of your predecessors?

Are you prompted by ulterior motives?

As a member of a race that believes in (?) and boasts of its fairness to all men, do you believe you are doing justice to practically 50,000 citizens of this city—one-third of its entire population—by chronicling our births as at present?

Can you give any sane and sensible reason why we should be profaned and held in such contumely by the action of your department?

We are all members of the same human family and the hue of our skin does and should not prevent us receiving the same considerations shown other citizens of this or any other community.

Society should and must know if our children are legally born and according to moral laws.

Your reports fail to disclose this very important and essential fact.

Therefore, we kindly ask you to give this phase of your work your immediate attention and thus forever dispel any doubt o conjecture as to the legitimacy of the Negro children born in this metropolis.

As citizens and taxpayers we think this much is due us and our posterity.

If it is continued, we shall conclude that it is being done maliciously, malevolently, malignantly and shall employ our journalistic howitzers to continue to denounce it or employ whatever legal means are necessary to remedy this state of affairs.

The letter to the Governor sets forth that a large sum has not been asked, because of the unsettled conditions, but that it is imperative that a start be made in handling the grave tuberculosis problem among the negroes, not only in conformity with humane considerations, but as protection of the whites from contagion. It is stated that the colored people, who are one-fifth of the State's population, furnish nearly one-third the total deaths from tuberculosis, showing that the disease is twice as prevalent among that race as among the whites.

1 Post

SUBURBAN DISPATCHER
DECEMBER 4, 1919

COLORED SANATORIUM

The board of managers of the Maryland Tuberculosis Sanatorium, located at Sabillasville, this county, through Senator John Walter Smith, its president, and United States District Attorney Samuel K, Dennis, its secretary, has written Governor Harrington asking that he include in his budget $100,000 for building and equipping State sanatoria for colored tubercular patients and $50,000 for maintenance for the fiscal year beginning October 1, 1919. The period before that date would be occupied in construction.